| Fill in this information to identify your case: |  |                                    |
|---|--|------------------------------------|
| United States Bankruptcy Court for the :        |  |                                    |
| NORTHERN District of ILLINOIS (State)           |  |                                    |
| Case Number (If known):                         | Chapter you are filing under:  Chapter 7  Chapter 11  Chapter 12  Chapter 13 | Check if this is an amended filing |

## Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1:            | Identify Yourself  |   |   |
|--------------------|--|---|---|
|                    |  | About Debtor 1:                             | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your            | full name  |   |   |
| goverr<br>identifi | he name that is on your iment-issued picture cation (for example, river's license or | Yolanda First name  Ann Middle name         | First name  Middle name                       |
| Bring y            | our picture cation to your meeting e trustee.  | Davis Last name  Suffix (Sr., Jr., II, III) | Last name  Suffix (Sr., Jr., II, III)         |
| 2. All ot          | her names you  | Yolanda                                     |   |
|                    | used in the last 8   | First name                                  | First name                                    |
|                    | e your married or<br>n names.  | Ann Middle name Jones                       | Middle name                                   |
|                    |  | Last name                                   | Last name                                     |
|                    |  | First name                                  | First name                                    |
|                    |  | Middle name                                 | Middle name                                   |
|                    |  | Last name                                   | Last name                                     |
| your               | the last 4 digits of<br>Social Security  | xxx - xx - <u>3640</u>                      | XXX - XX                                      |
| Individ            | nber or federal<br>ividual Taxpayer<br>ntification number                            | OR  | OR  |
|                    |  | <b>9</b> xx - xx                            | 9xx - xx                                      |

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Document Yolanda Case Number (if known) \_ Ann Debtor 1 First Name Middle Name Last Name

|    |  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):  |
|----|--|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | Business name  Business name  EIN  EIN   | Business name  Business name  EIN  EIN   |
| 5. | Where you live   | 449 W 61ST  Number Street  | If Debtor 2 lives at a different address:  Number Street   |
|    |  | APT 1  Chicago IL 60621  City State ZIP Code  COOK  County  If your mailing address is different from the one                    | City State ZIP Code  County  If Debtor 2's mailing address is different from   |
|    |  | above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number Street  P.O. Box       | the one above, fill it in here. Note that the court will send any notices this mailing address.  Number Street  P.O. Box         |
|    |  | City State ZIP Code  | City State ZIP Code  |
| 6. | Why you are choosing this district to file for bankruptcy.   | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
|    |  | have another reason. Explain. (See 28 U.S.C. § 1408  | I have another reason. Explain. (See 28 U.S.C. § 1408  |

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Document Yolanda Case Number (if known) \_ Ann First Name Middle Name Last Name

| Pa  | Tell the Court About You  | r Bankruptcy  | Case  |                       |   |                          |  |
|-----|---|---|---|-----------------------|---|--------------------------|--|
| 7.  | The chapter of the<br>Bankruptcy Code you   | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.   |   |                       |   |                          |  |
|     | are choosing to file  | ☐ Chapter 7 ☐ Chapter 11  |   |                       |   |                          |  |
|     | under   |   |   |                       |   |                          |  |
|     |   | ☐ Chap  | ter 12  |                       |   |                          |  |
|     |   | ■ Chap  | oter 13   |                       |   |                          |  |
| 8.  | How you will pay the fee  | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.  I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).  I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is |   |                       |   |                          |  |
|     |   | less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition.   |   |                       |   |                          |  |
| 9.  | Have you filed for bankruptcy within the last 8 years?  | □ No ■ Yes.   | District ILNBKE   | When                  | 02/24/2015 Case Number                                | 06240                    |  |
|     |   |   | District None   | When                  |   |                          |  |
|     |   |   | District  | When                  | Case Number<br>MM / DD / YYYY                         |                          |  |
| 10. | Are any bankruptcy cases pending or being   | ■ No  |   |                       |   |                          |  |
|     | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>parter, or by | ☐ Yes.  |   |                       | Relationship to you Case Number, if kn                |                          |  |
|     | affiliate?  |   |   |                       | Relationship to you Case Number, if kn MM / DD / YYYY |                          |  |
| 11. | Do you rent your residence?   | ■ No.<br>□ Yes.   | Go to line 12<br>Has your landlord obtainersidence?                       | ed an eviction judgme | nt against you and do you want to                     | stay in your             |  |
|     |   |   | ☐ No. Go to line 12. ☐ Yes. Fill out <i>Initial</i> 3 this bankruptcy pet |                       | viction Judgment Against You (For                     | m 101A) and file it with |  |

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| Debto           | or 1 Yolanda  | Ann   | Document  | Page 4 of 60  Case Number (if known)   |
|-----------------|---|---|---|--|
| Debte           | First Name  | Middle Name   | Last Name   | case railises ( <i>intermy</i>         |
| Par             | rt 3: Report About Any Busi   | nesses You Own  | as a Sole Proprietor  |  |
| 10              | Are you a sole proprietor   | ■ No.   | Go to Part 4.   |  |
| 12.             | of any full- or part-time   | Yes.  | Name and location of business   | 3                                      |
|                 | business?   | _   |   |  |
| bu<br>ind<br>se | A sole proprietorship is a<br>business you operate as an<br>individual, and is not a<br>separate legal entity such as   |   | Name of business, if any  |  |
|                 | a corporation, partnerhsip, or LLC.  If you have more than one  |   | Number Street   |  |
|                 | sole proprietorship, use a separate sheed and attach it to this petition.   |   |   |  |
|                 |   |   | City  | State Zip Code                         |
|                 |   |   | Check the appropriate box to d  | describe your business:                |
|                 |   |   | ☐ Health Care Business (as  | s defined in 11 U.S.C. § 101(27A))     |
|                 |   |   | ☐ Single Asset Real Estate  | e (as defined in 11 U.S.C. § 101(51B)) |
|                 |   |   | ☐ Stockbroker (as defined   | in 11 U.S.C. § 101(53A))               |
|                 |   |   | ☐ Commodity Broker (as de   | efined in 11 U.S.C. § 101(6))          |
|                 |   |   | ☐ None of the above   |  |
| 13.             | Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business debtor?</i> For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D). | appropriation balance shadocuments  No. I  No. I  Tyes. I | e deadlines. If you indicate that neet, statement of operations, cased onet exist, follow the proced arm not filing under Chapter 11.  am filing under Chapter 11, but the Bankruptcy Code. |  |
| Pai             | Report if You Own or H  | lave Any Hazard   | ous Property or Any Property Tha  | at Needs Immediate Attention           |
| 14.             | Do you own or have any  | No.   |   |  |
|                 | property that poses or is<br>alleged to pose a threat<br>of imminent and<br>indentifiable hazard to   | Yes. V  | Vhat is the hazard?   |  |
|                 | public health or safety?  |   |   |  |
|                 | Or do you own any property that needs immediate attention?  |   | If immediate attention is needed  | f, why is it needed?                   |
|                 | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?   |   |   |  |
|                 |   | ,   | Where is the property?  | er Street                              |
|                 |   |   | Nullibe   |  |

City

State

ZIP Code

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Debtor 1

Yolanda Ann Document Last Name

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Case Number (if known) \_

Part 5:

**Explain Your Efforts to** 

Middle Name

Tell the court whether you have received a briefing about credit counseling.

First Name

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| Receive a Briefing About Credit Counseling  |  |  |  |
|---|--|--|--|
| About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |  |  |
| You must check one:   | You must check one:  |  |  |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.  | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.   |  |  |
| Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.   |  |  |
| ☐I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.  | ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.  |  |  |
| Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.  |  |  |
| I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.  |  |  |
| To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.   |  |  |
| Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |  |  |
| I am not required to receive a briefing about<br>credit counseling because of:  | I am not required to receive a briefing about credit counseling because of:  |  |  |
| Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.   |  |  |
| Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I   | Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I  |  |  |

reasonably tried to do so.

duty in a military combat zone.

Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

reasonably tried to do so.

duty in a military combat zone.

Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

Debtor 1 Yolanda Ann Document Page 6 of 60

Case Number (if known)

Last Name

| Pa  | t 6: Answer These Questions   | for Reporting Purposes  |   |  |  |  |
|-----|---|---|---|--|--|--|
| 16. | What kind of debts do you have?   | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17. |   |  |  |  |
|     |   |   | business debts? Business debts are debts estment or through the operation of the busine                   | •  |  |  |
|     |   | No. Go to line 16c.   |   |  |  |  |
|     |   | Yes. Go to line 17.   | ours that are not consumer debts or business of   | lahta  |  |  |
|     |   |   | owe that are not consumer debts or business o   |  |  |  |
| 17. | Are you filing under<br>Chapter 7?  | No. I am not filing under Ch  | hapter 7. Go to line 18.  |  |  |  |
|     | Do you estimate that after<br>any exempt property is<br>excluded and<br>administrative expenses<br>are paid that funds will be<br>available for distribution<br>to unsecured creditors? |   | ter 7. Do you estimate that after any exempt pes are paid that funds will be available to distril         |  |  |  |
| 18. | How many creditors do   | <b>■</b> 1-49   | 1,000-5,000<br>   | 25,001-50,000  |  |  |
|     | you estimate that you owe?  | □ 50-99<br>□ 100-199  | ☐ 5,001-10,000<br>☐ 10,001-25,000   | ☐ 50,001-100,000<br>☐ More than 100,000  |  |  |
|     |   | 200-999   | 10,001-23,000   | More than 100,000  |  |  |
| 19. | How much do you estimate your assets to be worth?   | □ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million   | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion  More than \$50 billion |  |  |
| 20. | How much do you estimate your liabilities to be?  | □ \$0-\$50,000<br>□ \$50,001-\$100,000<br>■ \$100,001-\$500,000<br>□ \$500,001-\$1 million  | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion  |  |  |
| Pa  | Sign Below  |   |   |  |  |  |
| For | you   | I have examined this petition, and correct.   | I declare under penalty of perjury that the info  | rmation provided is true and   |  |  |
|     |   |   | oter 7, I am aware that I may proceed, if eligible inderstand the relief available under each chap        |  |  |  |
|     |   | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).                            |   |  |  |  |
|     |   | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  |   |  |  |  |
|     |   | <del>-</del>  | ment, concealing property, or obtaining money in fines up to \$250,000, or imprisonment for uld 3571.     |  |  |  |
|     |   | /s/ Yolanda Ann Davis   | ×   |  |  |  |
|     |   | Signature of Debtor 1   | Signa   | ture of Debtor 2   |  |  |
|     |   | Executed on 02/08/2016 MM / DD  |   | uted on  |  |  |

First Name

Middle Name

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Debtor 1 Yolanda Ann Davis Case Number (if known) \_\_\_\_\_\_

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Steven Scott Camp            | Date    | Date: 01/25/2016                 |
|----------------------------------|---------|----------------------------------|
| Signature of Attorney for Debtor | _       | MM / DD / YYYY                   |
| Steven Scott Camp                |         |                                  |
| Printed name                     |         |                                  |
| Geraci Law L.L.C.                |         |                                  |
| Firm name                        |         |                                  |
| 55 E. Monroe St., #3400          |         |                                  |
|                                  |         |                                  |
| Number Street                    |         |                                  |
| Number Street                    |         |                                  |
| Number Street                    |         |                                  |
|                                  | IL      | 60603                            |
| Number Street  Chicago City      | ILState | 60603<br>ZIP Code                |
| Chicago                          |         |                                  |
| <u>Chicago</u> City              | State   | ZIP Code                         |
| Chicago                          | State   |                                  |
| <u>Chicago</u><br>City           | State   | ZIP Code                         |
| <u>Chicago</u><br>City           | State   | ZIP Code  ddressndil@geracilaw.c |

| Fill in this information to identify your case:  |             |             |           |  |  |
|--|-------------|-------------|-----------|--|--|
| Debtor 1   | Yolanda Ann |             | Davis     |  |  |
|  | First Name  | Middle Name | Last Name |  |  |
| Debtor 2   |             |             |           |  |  |
| (Spouse, if filing)  | First Name  | Middle Name | Last Name |  |  |
| United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> (State) |             |             |           |  |  |
| Case Number  |             |             |           |  |  |
| (If known)   |             |             |           |  |  |

| Check if this is a |
|--------------------|
| amended filing     |

## Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part 1: Summarize Your Assets  |                                    |
|--|------------------------------------|
|  | Your assets Value of what you own  |
| Schedule A/B: Property (Official Form 106A/B)     1a. Copy line 55, Total real estate, from Schedule A/B   | \$0                                |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$ 113,000                         |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$ 113,000                         |
|  |                                    |
| Part 2: Summarize Your Liabilities   |                                    |
|  | Your liabilities<br>Amount you owe |
| <ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol> | \$107,663                          |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F  | \$10,135<br>\$37,914               |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | <del></del>                        |
|  |                                    |
| Summarize Your Liabilities   |                                    |
| 4. Schedule I: Your Income (Official Form 106I)  | \$2,610.33                         |
| Copy your combined monthly income from line 12 of Schedule I   |                                    |

Page 9 of 60 Document Yolanda Ann Case Number (if known) \_ First Name Middle Name Last Name **EntriesDescription AssetsAmount LiabilitiesAmount Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$ 2,347.84 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 of Schedule E/F, copy the following: \$ 0.00 9a. Domestic support obligations (Copy line 6a.) \$\_10,134.51 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  $_{0.00}$ 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) \$ 0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$ 0.00 priority claims. (Copy line 6g.)

\$ 0.00

\$ 10,134.51

9g. Total. Add lines 9a through 9f.

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

|  | Caso 16   | 04021 Doc 1  | Filad 02/10/16  | Entered 02/10/16 09:37   | 7:43 Desc Main   |
|--|---|--|---|--|--|
| Fill in this in                                      | formation to identi   | fy your case and this filin  |   | 0 of 60  |  |
| Debtor 1   | Yolanda   | Ann  | Davis   |  |  |
|  | First Name  | Middle Name  | Last Name   |  |  |
| Debtor 2<br>(Spouse, if filing)                      | First Name  | Middle Name  | Last Name   |  |  |
| United States  | Bankruptcy Court for t  | he : <u>NORTHERN</u> District  | of ILLINOIS   |  |  |
| Case Number  |   |  | (State)   |  | Check if this is an  |
| (If known)   |   |  | <del></del>   |  | amended filing   |
| Official F   | orm 106A/E  | <u>3</u>   |   |  |  |
| Schedul  | e A/B: Pro  | perty  |   |  | 12/15  |
| category where<br>responsible for<br>pages, write yo | you think it fits be<br>supplying correct<br>ur name and case r | st. Be as complete and ac<br>information. If more spac<br>number (if known). Answe | ccurate as possible. If two m<br>e is needed, attach a separa | t fits in more than one category, list the<br>narried people are filing together, both a<br>te sheet to this form. On the top of any<br>ave an Interest In | are equally  |
|  | n or have any lega  | l or equitable interest in a   | any residence, building, land                                 | d, or similar property?  |  |
| No.  | Describe  |  |   |  |  |
| _  |   |  | What is the property? Che                                     | DO III   | ot deduct secured claims or exemptions. Put  |
| 449 W 61   |   |  | Single-family home  | Credi  | mount of any secured claims on Schedule D:<br>litors Who Have Claims Secured by Property |
| Street addre   | ess, if available, or oth                                       | er description   | Duplex or multi-unit buildi  Condominium or coopera           | _  | ent value of the Current value of the  |
|  |   |  | Manufactured or mobile h                                      | entire   | property? portion you own?   |
| Chicago  |   | IL 60621   | Land  | \$   | 109,900.00 \$ 109,900.00   |
| City   |   | State ZIP Code   | Investment property   |  |  |
| County   |   |  | Timeshare Other   |  | ribe the nature of your ownership<br>est (such as fee simple, tenancy by                 |
| ·  |   |  | Who has an interest in the                                    | the er   | ntireties, or a life estat), if known.   |
|  |   |  | Debtor 1 only   |  |  |
|  |   |  | Debtor 2 only   |  |  |
|  |   |  | Debtor 1 and Debtor 2 on                                      | (s   | Check if this is a community property see instructions)                                  |
|  |   |  | At least one of the debtor                                    | s and another  h to add about this item, such as local   |  |
|  |   |  | property identification num                                   |  |  |
|  |   |  | ur entries fro Part 1, includi                                | ng any entries for pages   | \$109,900.00   |
| Part 2:  | Describe Your Vehic   | les  |   |  |  |
| Do you own I   | aso or have legal   | or aquitable interest in a   | y vohicles, whether they ar                                   | e registered or not? Include any vehicles  | ,  |
|  |   | •  | •   | xecutory Contracts and Unexpired Lease   |  |
| _  | s, trucks, tractors, s  | sport utility vehicles, mot  | orcycles  |  |  |
| No.  | Describe  |  |   |  |  |
| 04. Watercraft                                       | , aircraft, motor ho  | •  | reational vehicles, other veh                                 | -  |  |
| No.  | Dodio, iralicio, molors   | , porsonal watercraft, fishling v  | esseis, snowmobiles, motorcycle                               | 200033011C3  |  |
| Yes.   | Describe  | tion you com far all af  | ur ontrino fra Davi O in al. "                                | ng any entries for page  |  |
| o. Auu tile dol                                      | iai vaiue oi the por  | non you own for all of yo  | ur entries fro Part 2, includii                               | ng any enunes for pages  | 444  |

Record # 698385 Page 1 of 6 Official Form 106A/B Schedule A/B: Property

you have attached for Part 2. Write that number here .....-----

\$ 0.00

Debtor 1

Yolanda Case 16-04021

Eilad 02/10/16 Doc 1

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Desc Main

First Name Middle Name

| -1 | Davis<br>Davis        |  |
|----|-----------------------|--|
| 1  | Döcument<br>Last Name |  |

|     | Part 3:                | Describe Your Pe      | rsonal and Household Items   |   |            |
|-----|------------------------|-----------------------|--|---|------------|
| Do  | you own or             | r have any legal      | or equitable interest in any of the following items?   | Current value of portion you ow Do not deduct sec or exemptions | n?         |
| 06. | . Household            | d goods and furr      | ishings  |   |            |
|     | Examples:              | Major appliances, 1   | urniture, linens, china, kitchenware   |   |            |
|     | Yes.                   | Describe              | Furniture, linens, small appliances, table & chairs, bedroom set \$2,000   | <b>¢</b>  | 2,000.00   |
| 07. |                        | Televisions and rad   | dios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games | <b>4</b>  |            |
|     | Yes.                   | Describe              |  | \$  | 0.00       |
| 08. | stamp, coin            | Antiques and figuri   | nes; paintings, prints, or other artwork; books, pictures, or other art objects; collections; other collections, memorabilia, collectibles   |   |            |
|     | Yes.                   | Describe              |  | \$  | 0.00       |
| 09. | . Equipment            | t for sports and      | hobbies  |   |            |
|     | and kayaks             | s; carpentry tools; n | ic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes ausical instruments                                 |   |            |
|     | Yes.                   | Describe              |  | \$  | 0.00       |
| 10. | No.                    |                       | guns, ammunition, and related equipment  |   |            |
|     | Yes.                   | Describe              |  | \$  | 0.00       |
| 11. | Examples:              | Everyday clothes, f   | urs, leather coats, designer wear, shoes, accessories  |   |            |
|     | Yes.                   | Describe              | Necessary wearing apparel \$100  | •   | 100.00     |
| 12. | Examples: gold, silver |                       | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,   | <b></b>   | 100.0      |
|     | Yes.                   | Describe              | Costume jewelry \$100  | •   | 100.00     |
| 13. | No.                    | Dogs, cats, birds, h  | iorses   | <u> </u>  |            |
|     | Yes.                   | Describe              |  | \$  | 0.00       |
| 14. | Any other No.          | personal and ho       | usehold items you did not already list, including any health aids you did not list   |   |            |
|     | Yes.                   | Describe              | Books and pictures \$100   | \$  | 100.00     |
| 15. | Add the do             | llar value of all     | of your entries from Part 3, including any entries for pages you have attached   |   | 60.000.00  |
|     | for Part 3.            | Write that numb       | er here>   |   | \$2,300.00 |
|     |                        |                       |  |   |            |

Debtor 1

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Filed 02/10/16

Document
Last Name Yolanda Case 16-04021 Desc Main Doc 1 First Name Middle Name

| F           | art 4:                    | escribe Your Fir                    | ancial Assets  |  |   |
|-------------|---------------------------|-------------------------------------|--|--|---|
|             |                           | have any legal                      | or equitable interest in any of the  | following?   | Current value of the portion you own?  Do not deduct secured claims or exemptions |
| 16.         | Examples: No.             | Money you have in                   | your wallet, in your home, in a safe depo  | osit box, and on hand when you file your petition                                    |   |
|             | <u>—</u>                  |                                     |  |  | \$ <u> </u>   |
| 17.         |                           | Checking, savings                   | or other financial accounts; certificates of you have multiple accounts with the sar   | of deposit; shares in credit unions, brokerage houses,<br>me institution, list each. |   |
|             | Yes.                      | Describe                            | <b>71</b>  | Institution name:  | 100.00  |
|             |                           |                                     | Savings Account  | Bank of America  Bank of America   | \$ 100.00<br>\$ 700.00  |
|             |                           |                                     | Checking Account   | Datik Of Afficia   | \$ 700.00<br>\$ 800.00  |
| 18.         |                           | Bond funds, invest                  | ublicly traded stocks<br>ment accounts with brokerage firms, mor   | ney market accounts  | \$ <u> </u>   |
|             | Yes.                      | Describe                            | Institution or issuer name:  |  | \$ 0.00   |
| 19.         | Non-public<br>No.<br>Yes. |                                     | and interests in incorporated and  Name of Entity and Percent of Owr   | unincorporated businesses, including an interest in                                  | \$ <u> </u>   |
| 20.         | Government Negotiable     | nt and corporat                     | e bonds and other negotiable and<br>e personal checks, cashiers' checks, pro<br>re those you cannot transfer to someone  | non-negotiable instruments missory notes, and money orders.                          | \$ <u>0.0</u> 0   |
| 21.         | Yes.                      | Describe or pension acc             | Issuer name:   |  | \$0.00  |
|             | No.                       |                                     | RISA, Keogh, 401(k), 403(b), thrift saving  Type of account and Institution nan  | gs accounts, or other pension or profit-sharing plans                                |   |
| 22.         | -                         | Describe eposits and pre            | payments   |  | \$0.00  |
|             |                           |                                     | sits you have made so that you may con<br>indlords, prepaid rent, public utilities (ele  |  |   |
| 23.         | Yes.                      | Describe  A contract for a          | Institution name or individual:  periodic payment of money to yo   | ou, either for life or for a number of years)  | \$0.00  |
|             | No.                       |                                     | production and the production of the production and | .,   |   |
|             | Yes.                      | Describe                            | Issuer name and description:   |  | \$0.00  |
| 24.         |                           | an education I<br>§ 530(b)(1), 529A |  | BLE program, or under a qualified state tuition program.                             |   |
| 25          | Yes.                      | Describe                            | ·  | reparately file the records of any interests.11 U.S.C. § 521(c):                     | \$0.00  |
| <b>∠</b> 5. | No.                       |                                     | interests in property (other than a  | anything listed in line 1), and rights or powers                                     |   |
|             | Yes.                      | Describe                            |  |  | \$0.00  |
| 26.         |                           |                                     | marks, trade secrets, and other int<br>mes, websites, proceeds from royalties a  |  |   |
|             | Yes.                      | Describe                            |  |  | \$ <u>0.0</u> 0   |

Polanda Case 16-04021 Doc 1 Filed 02/10/16 Entered 02/10/16 09:37:43 Desc Main Page 13 of the Company Page 13 of t

| 27. Licenses, franchises, and other general intangibles  Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses  No.  |   |
|---|---|
| Yes. Describe   | \$  |
| Money or property owed to you?  | Current value of the portion you own?  Do not deduct secured claims or exemptions |
| 28. Tax refunds owed to you  No.  Yes. Describe   |   |
| 29. Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement  No.   | \$ <u>0.0</u> 0   |
| Yes. Describe   | \$ <u>0.00</u>  |
| 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No. |   |
| Yes. Describe  31. Interest in insurance policies   | \$ <u>0.0</u> 0   |
| Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  No. Company Name & Beneficiary:  Yes. Describe   |   |
| 32. Any interest in property that is due you from someone who has died  If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive                          | \$ <u>0.0</u> 0   |
| property because someone has died.  No.  Yes. Describe  |   |
| 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment  Examples: Accidents, employment disputes, insurance claims, or rights to sue  No.   | <u>\$</u> 0.00  |
| Yes. Describe   | \$ <u>0.0</u> 0   |
| 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights  No.  Yes. Describe  |   |
| 35. Any financial assets you did not already list   | \$ <u>0.0</u> 0   |
| No.  Yes. Describe  | \$ 0.00   |
| 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached  | \$800.00  |
| for Part 4. Write that number here  |   |
| 37. Do you own or have any legal or equitable interest in any business-related property?  No.   |   |
| Yes.  | Current value of the portion you own?  Do not deduct secured claims or exemptions |

Debtor 1 Yolanda Case 16-04021 Doc 1 Filed 02/10/16 Entered 02/10/16 09:37:43 Desc Main Page 14 of 60 under (if known) — Page 14 under (if known) — Pa

| 38. | Accounts receivable or commissions you already earned No.  |   |
|-----|--|---|
|     | Yes. Describe  | s 0.00  |
| 39. | Office equipment, furnishings, and supplies  Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  No. | <u> </u>  |
|     | Yes. Describe  | \$ 0.00   |
| 40. | Machinery, fixtures, equipment, supplies you use in business, and tools of your trade  No.   | ·   |
|     | Yes. Describe  | s 0.00  |
| 41. | Inventory  No.   | <u> </u>  |
|     | Yes. Describe  | s 0.00  |
| 42. | Interests in partnerships or joint ventures  | \$  |
|     | No. Name of Entity and Percent of Ownership:  Yes. Describe  | 7   |
| 40  |  | \$0.00  |
| 43. | Customer lists, mailing lists, or other compilations  No.  |   |
|     | Yes. Describe  | \$ 0.00   |
| 44. | Any business-related property you did not already list   | , <del>, , , , , , , , , , , , , , , , , , </del> |
|     | No.  Yes. Describe   | 1   |
|     |  | \$0.00  |
| 45. | Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here  | \$ 0.00   |
|     |  |   |
|     | Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  If you own or have an interest in farmland, list it in Part 1.                             |   |
| 46. | Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.   |   |
|     | Yes. Describe  |   |
| 47. | Farm animals   | \$ <u> </u>                                       |
|     | Examples: Livestock, poultry, farm-raised fish  No.  |   |
|     | Yes. Describe  | \$ 0.00   |
| 48. | Crops—either growing or harvested  | <u> </u>  |
|     | No.  Yes. Describe   | 1   |
| 49. | Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  | \$0.00  |
|     | No.  | 7   |
|     | Yes. Describe  | \$0.00  |
| 50. | Farm and fishing supplies, chemicals, and feed  No.  |   |
|     | Yes. Describe  | s 0.00  |

Debtor 1 Yolanda Case 16-04021 Doc 1 Filed 02/10/16 Entered 02/10/16 09:37:43 Desc Main Page 15 of 60 Description Page 15

| 51. Any farm- and commercial fishing-related property you did not already list No.   |             |                 |
|--|-------------|-----------------|
| Yes. Describe  |             | \$ <u>0.0</u> 0 |
| 52. Add the dollar value of all of your entries from Part 6, including any entries for Part 6. Write that number here        | • • •       | \$0.00          |
| Part 7: Describe All Property You Own or Have an Interest in That You Did Not L  | .ist Above  |                 |
| 53. Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership  No. |             |                 |
| Yes. Describe  |             | \$0.00          |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here  | >           | \$0.00          |
| Part 8: List the Totals of Each Part of this Form  |             |                 |
| 55. Part 1: Total real estate, line 2  |             | \$ 109,900.00   |
| 56. Part 2: Total vehicles, line 5   | \$ 0.00     |                 |
| 57. Part 3: Total personal and household items, line 15  | \$ 2,300.00 |                 |
| 58. Part 4: Total financial assets, line 36  | \$ 800.00   |                 |
| 59. Part 5: Total business-related property, line 45   | \$ 0.00     |                 |
| 60. Part 6: Total farm- and fishing-related property, line 52  | \$ 0.00     |                 |
| 61. Part 7: Total other property not listed, line 54   | \$ 0.00     |                 |
| 62. Total personal property. Add lines 56 through 61   | \$ 3,100.00 | \$ 3,100.00     |
| 63. Toal of all property on Schedule A/B. Add line 55 + line 62  |             | \$113,000.00    |
|  |             |                 |

Official Form 106A/B Record # 698385 Schedule A/B: Property Page 6 of 6

| Fill in this in     | formation to identif    | y your case:                     |                 |
|---------------------|-------------------------|----------------------------------|-----------------|
| Debtor 1            | Yolanda                 | Ann                              | Davis           |
|                     | First Name              | Middle Name                      | Last Name       |
| Debtor 2            | ·                       |                                  |                 |
| (Spouse, if filing) | First Name              | Middle Name                      | Last Name       |
| United States       | Bankruptcy Court for th | e: <u>NORTHERN</u> District of _ | ILLINOIS(State) |
| Case Number         |                         |                                  | _               |
| (If known)          |                         |                                  |                 |

# Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Claim as Exempt |  |   |   |                                      |  |  |  |  |  |
|---|--|---|---|--------------------------------------|--|--|--|--|--|
| 1. Which set of ex                                | 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.                |   |   |                                      |  |  |  |  |  |
| You are clair                                     | You are claiming state and federal nonbankruptcy exemptions . 11 U.S.C. § 522(b)(3)                                  |   |   |                                      |  |  |  |  |  |
| You are claim                                     | You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)   |   |   |                                      |  |  |  |  |  |
|   |  |   |   |                                      |  |  |  |  |  |
| 2. For any propert                                | y you list on Schedule A/B that yo   | u claim as exempt, fill in t            | the information below.  |                                      |  |  |  |  |  |
|   | on of the property and line on hat lists this property   | Current value of the portion you own    | Amount of the exemption you claim                               | Specific laws that allow exemption   |  |  |  |  |  |
|   |  | Copy the value from Schedule A/B        | Check only one box for each exemption                           |                                      |  |  |  |  |  |
| Brief<br>description:                             | 449 W 61St Chicago IL 60621 -<br>Primary Residence   | \$_109,900                              | \$15,000  | 735 ILCS 5/12-901 - \$15,000.00      |  |  |  |  |  |
| Line from Schedule A/B:                           | 01   |   | 100% of fair market value, up to any applicable statutory limit |                                      |  |  |  |  |  |
| Brief   | Furniture, linens, small appliances,   |   | any apphoable statutery mine                                    | 735 ILCS 5/12-1001(b) - \$2,000.00   |  |  |  |  |  |
| description:                                      | table & chairs, bedroom set  | \$_2,000                                | \$  |                                      |  |  |  |  |  |
| Line from   | 00   |   | 100% of fair market value, up to                                |                                      |  |  |  |  |  |
| Schedule A/B:                                     | 06   |   | any applicable statutory limit                                  |                                      |  |  |  |  |  |
| Brief description:                                | Necessary wearing apparel  | <b>\$</b> 100                           | Пs  | 735 ILCS 5/12-1001(a),(e) - \$100.00 |  |  |  |  |  |
| description.                                      |  | Ψ                                       | _   |                                      |  |  |  |  |  |
| Line from<br>Schedule A/B:                        | <u>11</u>  |   | 100% of fair market value, up to any applicable statutory limit |                                      |  |  |  |  |  |
| 2. Are you elsimin                                | g a homestead exemption of more  | than \$455 6752                         |   |                                      |  |  |  |  |  |
|   | •  |   | on or after the date of adjustment                              |                                      |  |  |  |  |  |
|   | (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment .) |   |   |                                      |  |  |  |  |  |
| =   | No.  Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?        |   |   |                                      |  |  |  |  |  |
|   | . , , , , , , , , , , , , , , , , , , ,  | , |   |                                      |  |  |  |  |  |
|   |  |   |   |                                      |  |  |  |  |  |
| Official Form 106C                                | Record # 698385  | Schedule C: T                           | he Property You Claim as Exempt                                 | Page 1 of 2                          |  |  |  |  |  |

Yolanda First Name

Ann

Document

Page 17 of 60 Number (if known)

Debtor 1

Middle Name

Last Name

|                           | ion of the property and line on that lists this property | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |
|---------------------------|--|--------------------------------------|---|------------------------------------|
|                           |  | Copy the value from Schedule A/B     | Check only one box for each exemption                           |                                    |
| Brief<br>lescription:     | Costume jewelry  | \$ <u>100</u>                        | <b>\$</b>   | 735 ILCS 5/12-1001(b) - \$100.00   |
| ine from<br>Schedule A/B: | 12   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Brief<br>escription:      | Books and pictures                                       | \$ <u>100</u>                        | \$  | 735 ILCS 5/12-1001(a) - \$100.00   |
| ine from<br>Schedule A/B: | 14   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| rief<br>escription:       | Savings Account, Bank of America, 100.00                 | \$ <u>100</u>                        |   | 735 ILCS 5/12-1001(b) - \$100.00   |
| ine from<br>chedule A/B:  | 17   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| rief<br>escription:       | Checking Account, Bank of America, 700.00                | \$ <u>700</u>                        | \$  | 735 ILCS 5/12-1001(b) - \$700.00   |
| ine from chedule A/B:     | <u>17</u>  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| sanedule AVD.             | <u>··</u>  |                                      |   |                                    |
| Scriedule AVD.            | <u>··</u>  |                                      |   |                                    |
| Scriedule AV.B.           | <u>··</u>  |                                      |   |                                    |
| Colecule A.B.             |  |                                      |   |                                    |
| Chedure A.B.              |  |                                      |   |                                    |
| The dute A.B.             |  |                                      |   |                                    |
| aneoure Arb.              |  |                                      |   |                                    |
| The dure Arb.             |  |                                      |   |                                    |
| Theodie A.B.              |  |                                      |   |                                    |
| The dure A.D.             |  |                                      |   |                                    |

| Fill in this in                 | Caco 16 0                              |                         | Eilod 02/10/16   | Entered 02/10/<br>8 of 60   | 16 09:37:43               | Desc Main                     |                    |
|---------------------------------|--|-------------------------|--|-----------------------------|---------------------------|-------------------------------|--------------------|
|                                 |  |                         |  | 0 01 00                     |                           |                               |                    |
| Debtor 1                        | Yolanda                                | Ann                     | Davis  |                             |                           |                               |                    |
|                                 | First Name                             | Middle Name             | Last Name  |                             |                           |                               |                    |
| Debtor 2<br>(Spouse, if filing) | First Name                             | Middle Name             | Last Name  |                             |                           |                               |                    |
|                                 |  |                         |  |                             |                           |                               |                    |
| United States                   | Bankruptcy Court for the               | e : <u>NORTHERN</u> Dis | trict of <u>ILLINOIS</u><br>(State)                                    |                             |                           |                               |                    |
| Case Number                     | г                                      |                         |  |                             |                           | Check if this                 |                    |
|                                 |  |                         |  |                             |                           | amended fil                   | ling               |
| Official F                      | <u>orm 106D</u>                        |                         |  |                             |                           |                               |                    |
| chedule                         | D: Creditors                           | Who Have C              | laims Secured by I   | Property                    |                           |                               | 12/15              |
|                                 |  |                         | people are filing together, both<br>Il Page, fill it out, number the e |                             |                           | nv                            |                    |
|                                 | s, write your name a                   |                         |  | manos, una utaon it to tim  | o romin on the top of a   | ,                             |                    |
| 1. Do any cre                   | ditors have claims se                  | ecured by your prope    | erty?  |                             |                           |                               |                    |
| ☐ No. Ch                        | neck this box and subr                 | mit this form to the co | urt with your other schedules. Yo                                      | ou have nothing else to rep | ort on this form.         |                               |                    |
| Yes. Fil                        | II in all of the informati             | on below.               |  |                             |                           |                               |                    |
|                                 |  |                         |  |                             |                           |                               |                    |
| Part 1:                         | List All Secured Claim                 | s<br>                   |  |                             | 2 / 1                     | 0.11                          | 0.1.0              |
| 2. List all se                  | cured claims. If a cre                 | ditor has more than o   | ne secured claim, list the credito                                     | or separately               | Column A  Amount of claim | Column A  Value of collateral | Column C Unsecured |
| for each cl                     | laim. If more than one                 | e creditor has a partic | ular claim, list the other creditors                                   | s in Part 2.                | Do not deduct the         | that supports this            | portion            |
| As much a                       | as possible, list the cla              | nims in alphabetical or | der according to the creditors na                                      | ame.                        | value of collateral       | claim                         | If any             |
| 2.1 City of 0                   | Chicago Dept of Wate                   | er                      | Describe the property that secur                                       | es the claim:               | <b>\$</b> 2,921.97        | <b>\$</b> _109,900.00         | \$ <u>2,921.97</u> |
| Creditor's                      |  |                         | 449 W 61St Chicago IL 60621 -  | Primary Residence           |                           |                               |                    |
| 333 S S                         |  |                         |  |                             |                           |                               |                    |
| Number                          | Street                                 |                         |  |                             |                           |                               |                    |
|                                 |  |                         | As of the date you file, the claim                                     | is: Check all that apply.   |                           |                               |                    |
| Chicago                         | o I                                    | L 60680                 | Contingent Unliquidated  |                             |                           |                               |                    |
| City                            | 5                                      | State Zip Code          | Disputed   |                             |                           |                               |                    |
| Who owes                        | the debt? Check one.                   |                         | Nature of Lien. Check all that appl                                    | v.                          |                           |                               |                    |
| Debtor                          | 1 only                                 |                         | An agreement you made (such a  |                             |                           |                               |                    |
| Debtor                          | 2 only                                 |                         | car loan)  |                             |                           |                               |                    |
| =                               | 1 and Debtor 2 only                    |                         | Statutory lien (such as tax lien, n                                    | nechanic's lien)            |                           |                               |                    |
| At least                        | one of the debtors and a               | another                 | Judgment lien from a lawsuit   |                             |                           |                               |                    |
| Check                           | if this claim relates to               | a                       | Other (including a right to offset)                                    |                             |                           |                               |                    |
|                                 | unity debt                             |                         |  |                             |                           |                               |                    |
| Date Debt                       | was incurred                           |                         | Last 4 digits of account number  |                             | <b>\$</b> 104,741.00      | • 100 000 00                  | • 0.00             |
|                                 | argo HM Mortgag                        |                         | Describe the property that secur                                       |                             | \$_104,741.00             | \$ <u>109,900.00</u>          | \$ <u>0.00</u>     |
| Creditor's<br>8480 St           | Name<br>tagecoach Cir                  |                         | 449 W 61St Chicago IL 60621 -  | Primary Residence           |                           |                               |                    |
| Number                          | Street                                 |                         |  |                             |                           |                               |                    |
|                                 |  |                         | As of the date you file, the claim                                     | is: Check all that apply.   |                           |                               |                    |
|                                 |  |                         | Contingent   |                             |                           |                               |                    |
| Frederic<br>City                |  | MD 21701<br>            | Unliquidated   |                             |                           |                               |                    |
| City                            | `                                      | State Zip Code          | Disputed   |                             |                           |                               |                    |
| _                               | the debt? Check one.                   |                         | Nature of Lien. Check all that appl                                    |                             |                           |                               |                    |
| Debtor                          | -                                      |                         | An agreement you made (such a  | s mortgage or secured       |                           |                               |                    |
| Debtor                          | 2 only<br>1 and Debtor 2 only          |                         | car loan)  Statutory lien (such as tax lien, n                         | nechanic's lien)            |                           |                               |                    |
| =                               | t one of the debtors and a             | another                 | Judgment lien from a lawsuit   | neonanie s ilen)            |                           |                               |                    |
|                                 |  |                         | Other (including a right to offset)                                    |                             |                           |                               |                    |
|                                 | if this claim relates to<br>unity debt | а                       |  |                             |                           |                               |                    |
|                                 |  | 13-2015                 | Last 4 digits of account number  | <u>8674</u>                 |                           |                               |                    |
|                                 |  |                         | n this page. Write that number   |                             | \$ <u>107,662.97</u>      |                               |                    |

|                         |                                  | Caso 16 04   | 021 Doc   | 1 Filed 02/10/16 F   | ntered 02/10/16 09:37   | .12                    | Dose Main       | •                  |
|-------------------------|----------------------------------|--|---|--|---|------------------------|-----------------|--------------------|
| Fill                    | in this inf                      | formation to identify ye                           |   |  | 9 of 60   | .43                    | Desc Main       | I                  |
| Del                     | btor 1                           | Yolanda  | Ann   | Davis  |   |                        |                 |                    |
| Dei                     | DIOI I                           | First Name   | Middle Name   | Last Name  |   |                        |                 |                    |
| Del                     | btor 2                           |  |   |  |   |                        |                 |                    |
|                         | ouse, if filing)                 | First Name   | Middle Name   | Last Name  |   |                        |                 |                    |
| Uni                     | ited States                      | Bankruptcy Court for the :                         | NORTHERN D  | istrict of ILLINOIS  |   |                        |                 |                    |
|                         |                                  |  | <u> </u>  | (State)  |   |                        | Chook is        | f this is an       |
|                         | se Number<br>known)              |  |   |  |   |                        | amende          |                    |
| Sch<br>Be as            | edule<br>complete                | and accurate as possi                              | ble. Use Part 1 fo                                      | e Unsecured Claims or creditors with PRIORITY claims an pired leases that could result in a cla                      |   |                        |                 | 12/15              |
| /B: P<br>redito<br>eede | roperty (Cors with padd, copy th | Official Form 106A/B) a<br>artially secured claims | and on Schedule of that are listed in out, number the e | G: Executory Contracts and Unexpir<br>I Schedule D: Creditors Who Have Co<br>entries in the boxes on the left. Attac | red Leases (Official Form 106G). Do r<br>laims Secured by Property. If more s | not inclus<br>space is | de any          |                    |
| Par                     | rt 1:                            | ist All of Your PRIORIT                            | Y Unsecured Claim                                       | 15   |   |                        |                 |                    |
| 1. <b>D</b> o           | o any cred                       | ditors have priority uns                           | secured claims ag                                       | gainst you?  |   |                        |                 |                    |
|                         | -                                | to Part 2.   |   |  |   |                        |                 |                    |
|                         | Yes.                             |  |   |  |   |                        |                 |                    |
|                         | _                                |  |   | tor has more than one priority unsecur   | · · ·   |                        |                 |                    |
|                         |                                  |  |   | <ul> <li>claim has both priority and nonpriority<br/>aims in alphabetical order according to</li> </ul>              |   |                        | -               |                    |
|                         |                                  | •  |   | art 1. If more than one creditor holds a   | <u>.                                      </u>                                |                        | •               |                    |
| (F                      | or an exp                        | lanation of each type of                           | f claim, see the ins                                    | structions for this form in the instruction  | n booklet.)   |                        |                 |                    |
|                         |                                  |  |   |  | Total   | claim                  | Priority amount | Nonpriority amount |
| 2.1                     | IRS Pric                         | ority Debt   |   | Last 4 digits of account number  | <b>\$</b> 1,32  | 29.66                  | \$ 1,329.66     | \$ 0.00            |
| 2.1                     | Creditor's N                     |  |   | Last 4 digits of account number  |   |                        |                 | ·                  |
|                         | PO Box                           | 7346   |   | When was the debt incurred?  | 2009  |                        |                 |                    |
|                         | Number                           | Street   |   |  |   |                        |                 |                    |
|                         |                                  |  |   | As of the date you file, the claim is: (   | Check all that apply.   |                        |                 |                    |
|                         |                                  |  |   | Contingent   |   |                        |                 |                    |
|                         | Philadel                         | phia PA  | 19101   | Unliquidated   |   |                        |                 |                    |
| ,                       | City                             | Star the debt? Check one.                          | te Zip Code   | Disputed   |   |                        |                 |                    |
| i                       | Debtor 1                         |  |   |  |   |                        |                 |                    |
| i                       | =                                | •  |   | Type of PRIORITY upgeoused eleims  |   |                        |                 |                    |
| l<br>I                  | Debtor 2                         | •  |   | Type of PRIORITY unsecured claim:  |   |                        |                 |                    |
| l<br>T                  | =                                | 1 and Debtor 2 only                                | othor   | Domestic support obligations  Taxes and certain other debts you ow   | e the government  |                        |                 |                    |
| l<br>r                  | =                                | one of the debtors and and                         | outer   | i axes and certain other debts you ow  | e die governinent   |                        |                 |                    |
| l                       | _                                | if this claim relates to a<br>inity debt           |   | Claims for death or personal injury wh   | nile vou were   |                        |                 |                    |
| ı                       |                                  | n subject to offest?                               |   | intoxicated  | mo you wore   |                        |                 |                    |
| į                       | No                               | .,   |   | _  |   |                        |                 |                    |
| i                       | <b>=</b> ,,,                     |  |   | Other. Specify   | <del></del>   |                        |                 |                    |

Doc 1 Filed 02/10/16 Entered 02/10/16 09:37:43 Desc Main Case 16-04021 Page 20 of 60 Case Number (if known) Document Yolanda Debtor 1 Your PRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim **Priority** Nonpriority amount amount \$ 2,218.30 \$ 2,218.30 **\$**0.00 IRS Priority Debt 2.2 Last 4 digits of account number \_ Creditor's Name 2014 When was the debt incurred? PO Box 7346 As of the date you file, the claim is: Check all that apply. Contingent Philadelphia PA 19101 Unliquidated State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Check if this claim relates to a community debt Claims for death or personal injury while you were Is the claim subject to offest? intoxicated No Other. Specify \_ Yes IRS Priority Debt \$ 6,586.55 \$ 6,586.55 \$ 0.00 2.3 Last 4 digits of account number \_ Creditor's Name 2010 PO Box 7346 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Philadelphia PA 19101 Unliquidated State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim relates to a community debt Claims for death or personal injury while you were Is the claim subject to offest? intoxicated No Other. Specify \_ List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

**Total claim** 

| Debtor 1 | Yolanda                                     | Ann                                   | <b>Document</b>  | Page 21 of 60 Case Number (if known)   |                  |
|----------|---|---------------------------------------|--|--|------------------|
|          | First Name                                  | Middle Name                           | Last Name  |  |                  |
| 4.1      | Capital ONE                                 |                                       | Last 4 digits of account number  | 5203   | \$ <u>221.00</u> |
|          | Creditor's Name                             |                                       | NATIonal control of the state o | 2015-2015  |                  |
|          | Po Box 27288                                |                                       | When was the debt incurred?  |  |                  |
|          | Number Street                               |                                       |  |  |                  |
|          |   |                                       | As of the date you file, the claim   | is: Check all that apply.  |                  |
|          | Tempe                                       | AZ 85285                              | Contingent   |  |                  |
|          | City  | State Zip Code                        | Unliquidated   |  |                  |
| v        | Vho owes the debt? Check                    |                                       | Disputed   |  |                  |
|          | Debtor 1 only                               |                                       |  |  |                  |
|          | Debtor 2 only                               |                                       | Type of NONPRIORITY unsecure   | ed claim:  |                  |
| Ī        | Debtor 1 and Debtor 2 only                  | /                                     | Student loans  |  |                  |
| [        | At least one of the debtors                 | and another                           | Obligations arising out of a sepa  | ration agreement or divorce  |                  |
| Ī        | Check if this claim relat                   | es to a                               | that you did not report as priority  | v claims   |                  |
| "        | community debt                              |                                       | Debts to pension or profit-sharin  | g plans, and other similar debts   |                  |
| ls       | s the claim subject to offes                | st?                                   |  |  |                  |
|          | No  |                                       | Other. Specify Collecting fo   | or Creditor  |                  |
|          | Yes<br>Capital ONE BANK USA                 | \ N                                   | 1 4 dinite of  | NULL   | \$ 0.00          |
| 4.2      | Creditor's Name                             | · · · · · · · · · · · · · · · · · · · | Last 4 digits of account number  |  | <b>\$_0.00</b>   |
|          | 15000 Capital One Dr                        |                                       | When was the debt incurred?  | 2013-2015  |                  |
|          | Number Street                               |                                       |  |  |                  |
|          |   |                                       | As of the date you file, the claim   | ie: Check all that apply   |                  |
|          |   |                                       | Contingent   | 13. Check all that apply.  |                  |
|          | Richmond                                    | VA 23238                              | Unliquidated   |  |                  |
|          | City  | State Zip Code                        | Disputed   |  |                  |
| Y        | Vho owes the debt? Check                    | one.                                  | Disputed   |  |                  |
|          | Debtor 1 only                               |                                       |  |  |                  |
|          | Debtor 2 only                               |                                       | Type of NONPRIORITY unsecure   | ed claim:  |                  |
|          | Debtor 1 and Debtor 2 only                  |                                       | Student loans  | and the control of th |                  |
|          | At least one of the debtors                 |                                       | Obligations arising out of a sepa<br>that you did not report as priority   | -  |                  |
| L        | Check if this claim relat<br>community debt | es to a                               | Debts to pension or profit-sharin  |  |                  |
| ls       | s the claim subject to offes                | st?                                   | Bests to pension of prone-sharm  | g plans, and other similar debts   |                  |
|          | No  |                                       | Other. Specify Credit Card   | or Credit Use  |                  |
|          | Yes   |                                       |  |  |                  |
| 4.3      | Chicago Patrolmans FC                       | U                                     | Last 4 digits of account number  | NULL   | \$ <u>526.00</u> |
|          | Creditor's Name                             | J                                     | Miles and the debt in several O  | 2014-2015  |                  |
|          | 1359 W Washington Blv                       | <u>u</u>                              | When was the debt incurred?  |  |                  |
|          | Number Street                               |                                       |  |  |                  |
|          |   |                                       | As of the date you file, the claim   | is: Check all that apply.  |                  |
|          | Chicago                                     | IL 60607                              | Contingent   |  |                  |
|          | City  | State Zip Code                        | Unliquidated   |  |                  |
| v        | Vho owes the debt? Check                    |                                       | Disputed   |  |                  |
|          | Debtor 1 only                               |                                       |  |  |                  |
|          | Debtor 2 only                               |                                       | Type of NONPRIORITY unsecure   | ed claim:  |                  |
|          | Debtor 1 and Debtor 2 only                  | <b>/</b>                              | Student loans  |  |                  |
|          | At least one of the debtors                 | and another                           | Obligations arising out of a sepa  | ration agreement or divorce  |                  |
|          | Check if this claim relat                   | es to a                               | that you did not report as priority  |  |                  |
| .        | community debt                              | -42                                   | Debts to pension or profit-sharin  | g plans, and other similar debts   |                  |
|          | s the claim subject to offes No             | str                                   | • O  | on Condition   |                  |
|          | Yes   |                                       | Other. Specify Credit Card   | or Credit Use  |                  |
|          |   |                                       |  |  |                  |

Official Form 106E/F

Doc 1 Filed 02/10/16 Entered 02/10/16 09:37:43 Desc Main Case 16-04021 Page 22 of 60 Document Yolanda Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Chicago Patrolmans FCU \$ 832.00 Last 4 digits of account number \_ Creditor's Name 2014-2015 1359 W Washington Blvd When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 60607 Chicago Unliquidated State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Personal Loan Yes City of Chicago Bureau Parking \$ 960.00 Last 4 digits of account number 4.5 PO Box 88292 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 60680 Chicago IL Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify Debt Owed COMENITY BANK/PIER 1 **NULL** \$ 0.00 4.6 Last 4 digits of account number Creditor's Name 2013-2015 4590 E Broad St When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Columbus OH 43213 Unliquidated City State Zip Code Disputed Who owes the debt? Check one.

Doc 1 Filed 02/10/16 Entered 02/10/16 09:37:43 Desc Main Case 16-04021 Page 23 of 60 Case Number (if known) Document Yolanda Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Great American Finance \$ 1,604.00 Last 4 digits of account number \_ Creditor's Name 2013-2015 20 N Wacker Dr Ste 2275 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 60606 Chicago Unliquidated State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Unknown Credit Extension Yes Legacy Loan Llc \$ 1,798.32 Last 4 digits of account number 4.8 Creditor's Name 9126 E 46th When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent OK 74145 Tulsa Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify \_\_\_Credit Extended to Debtor(S) Yes Secretary of State \$ 0.00 4.9 Last 4 digits of account number Creditor's Name 2701 S. Dirksen Pkwy. When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Springfield 62723 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim:

Case 16-04021 Doc 1 Page 24 of 60 Case Number (if known) **Document** Yolanda Ann Debtor 1 First Name \$ 31,973.00 TD Auto Finance 4.10 Last 4 digits of account number Creditor's Name PO Box 9001921 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Louisville Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? Other. Specify \_ List Others to Be Notified for a Debt That You Already Listed Part 3: 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Clerk, Second Mun Div On which entry in Part 1 or Part 2 list the original creditor? Name 5600 Old Orchard Rd Line \_\_1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Number

Last 4 digits of account number \_\_\_\_ \_\_\_\_

IL 60077

State Zip Code

Skokie

City

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Yolanda Debtor 1

Ann

Add the Amounts for Each Type of Unsecured Claim

**Document** 

37,914.32

|                          | ounts of certain types of unsecured claims.<br>unts for each type of unsecured claim. | This information is for statistica | al repo | rting purposes only. 28 U | .S.C. § 159. |
|--------------------------|---|------------------------------------|---------|---------------------------|--------------|
|                          |   |                                    |         | Total claim               |              |
| Total claims from Part 1 | 6a. Domestic support obligations  | 6a.                                |         | \$                        | 0.00         |

| • | 6a. Domestic support obligations   | 6a. | \$          |        |
|---|--|-----|-------------|--------|
|   | 6b. Taxes and Certain other debts you owe the government                           | 6b. | \$10,       | 134.51 |
|   | 6c. Claims for death or personal injury while you were intoxicated                 | 6c. | \$          | 0.00   |
|   | 6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here. | 6d. | \$          | 0.00   |
|   | 6e. <b>Total.</b> Add lines 6a through 6d.   | 6e. | \$10,       | 134.51 |
|   |  |     | Total claim |        |

| Total claims from Part 2 | 6f. Student loans   | 6f. | \$0.00      |
|--------------------------|---|-----|-------------|
|                          | 6g. Obligations arising out of a separation agreement<br>or divorce that you did not report as priority<br>claims | 6g. | \$0.00      |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts   | 6h. | \$0.00      |
|                          | 6i. <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                             | 6i. | \$37,914.32 |

6j. Total. Add lines 6f through 6i.

| Fill | l in this in                                       | Caso 16<br>formation to iden   |  | Filad 02/10/16   | Entered 02/10/16 09:37:43<br>6 of 60  | Desc Main           |
|------|--|--|--|--|---|---------------------|
| De   | ebtor 1  | Yolanda  | Ann  | Davis  |   |                     |
| De   | ibioi i  | First Name   | Middle Name  | Last Name  |   |                     |
|      | ebtor 2<br>ouse, if filing)                        | First Name   | Middle Name  | Last Name  |   |                     |
| Ca   | nited States lase Number known)                    | , ,  | r the : <u>NORTHERN</u> District of  | f_ <u>ILLINOIS</u><br>(State)  |   | Check if this is an |
|      |  | orm 106G   |  |  |   | amended filing      |
|      |  |  | ory Contracts and  | l Unavaired Las  |   | 12/1                |
| 1. D | nation. If monal pages o you hav No. Cho Yes. Fill | nore space is needs, write your name eany executory of eck this box and so in all of the informely each person ont, vehicle lease, | ded, copy the additional page and case number (if known contracts or unexpired lease submit this form to the court with mation below even if the contract or company with whom you lead to the company with whom you will will will will will will w | ye, fill it out, number the end). s? ith your other schedules. You acts or leases are listed in the contract or lease. | n are equally responsible for supplying corrections, and attach it to this page. On the top of the | f any<br>r (for     |
|      | ·  |  | hom you have the contract o  | r lease  | State what the contract or le   | ase is for          |
| 2.1  |  |  |  |  |   |                     |
|      | Name   |  |  |  | _   |                     |
|      | Number   | Street   |  |  |   |                     |
|      | City   |  | State Z  | ip Code  |   |                     |
| 2.2  |  |  |  |  |   |                     |
|      | Name   |  |  |  |   |                     |
|      | Number   | Street   |  |  |   |                     |
|      | City   |  | State Z  | ip Code  | -   |                     |
| 2.3  |  |  |  |  |   |                     |
|      | Name   |  |  |  |   |                     |
|      | Number   | Street   |  |  | -   |                     |
|      | City   |  | State Z  | ip Code  | -   |                     |
| 2.4  |  |  |  |  |   |                     |
|      | Name   |  |  |  |   |                     |
|      | Number   | Street   |  |  | -   |                     |
|      | City   |  | State Z  | ip Code  | -   |                     |
| 2.5  |  |  |  |  |   |                     |
|      | Name   |  |  |  |   |                     |
|      | Number   | Street   |  |  | -   |                     |

State Zip Code

City

| Fill in this in     | Fill in this information to identify your case: |                                     |                 |  |  |
|---------------------|---|-------------------------------------|-----------------|--|--|
| Debtor 1            | Yolanda   | Ann                                 | Davis           |  |  |
|                     | First Name                                      | Middle Name                         | Last Name       |  |  |
| Debtor 2            | -   |                                     |                 |  |  |
| (Spouse, if filing) | First Name                                      | Middle Name                         | Last Name       |  |  |
| United States       | Bankruptcy Court for                            | the : <u>NORTHERN</u> District of _ | ILLINOIS(State) |  |  |
| Case Number         | -   |                                     | — (State)       |  |  |
| (If known)          |   |                                     |                 |  |  |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A       | dditional Pages, write your name ar   | nd case number (if known). Answ          | er every question.   |   |
|-------------|---|--|----------------------|---|
| 1. <b>D</b> | o you have any codebtors? (If you a   | re filing a joint case, do not list eith | ner spouse as a code | btor.)  |
|             | No.   |  |                      |   |
|             | Yes   |  |                      |   |
|             | lithin the last 8 years, have you liverizona, California, Idaho, Lousiiana, N |  | • ,                  | unity property states and territories include and Wisconsin.) |
|             | No. Go to line 3.   |  |                      |   |
|             | Yes. Did your spouse, former spo  | use, or legal equivalent live with yo    | ou at the time?      |   |
|             |   | e or territory did you live?             | Fill ir              | n the name and current address of that person.                |
|             | Name of your spouse, former spouse or   | legal equivalent                         |                      |   |
|             |   |  |                      |   |
|             | Number Street   |  |                      |   |
|             | City  | State                                    | Zip Code             |   |
| 3           | chedule E/F, or Schedule G to fill ou   | at Column 2.                             |                      | Column 2: The creditor to whom you owe the debt               |
|             |   |  |                      | Check all schedules that apply:                               |
| 3.1         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
|             | City  | State                                    | Zip Code             |   |
| 3.2         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
| _           | City  | State                                    | Zip Code             |   |
| 3.3         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
|             | City  | State                                    | Zip Code             |   |

|                        | fy your case:                                |                        |
|------------------------|--|------------------------|
| Yolanda                | Ann  | Davis                  |
| First Name             | Middle Name                                  | Last Name              |
|                        |  |                        |
| First Name             | Middle Name                                  | Last Name              |
| Bankruptcy Court for t | he : <u>NORTHERN DISTRICT O</u>              | F ILLINOIS             |
| r                      |  | <u> </u>               |
|                        |  |                        |
|                        |  |                        |
|                        |  |                        |
|                        | First Name First Name Bankruptcy Court for t | First Name Middle Name |

Official Form 106I

**Schedule I: Your Income** 

12/15

MM / DD / YYYY

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Describe Employment  |  |                           |              |                                   |
|--|--|---------------------------|--------------|-----------------------------------|
| Fill in your employment information  |  | Debtor 1                  |              | Debtor 2 or non-filing spouse     |
| If you have more than one job, attach a separate page with information about additional employers.   | Employment status  | X Employed Not employed   | 1            | Employed  Not employed            |
| Include part-time, seasonal, or self-employed work.  | Occupation   | Driver                    |              |                                   |
| Occupation may Include student or homemaker, if it applies.  | Employers name   | MV Transportation         | n            |                                   |
|  | Employers address  | 2024 College St.          |              |                                   |
|  |  | Elk Horn, IA 5153         | 1            | ,                                 |
|  |  |                           |              |                                   |
|  | How long employed there?   |                           |              |                                   |
| Part 2: Give Details About Month   | ly Income  |                           |              |                                   |
| spouse unless you are separated.  If you or your non-filing spouse ha  | he date you file this form. If you have more than one employer, combine, attach a separate sheet to this f | ine the information for a | •            |                                   |
|  |  |                           | For Debtor 1 | For Debtor 2 or non-filing spouse |
| List monthly gross wages, salar deductions). If not paid monthly, or the salar deductions of the salar deductions of the salar deductions of the salar deductions. |  | \$2,122.84                | \$0.00       |                                   |
| 3. Estimate and list monthly overti  |  | \$0.00                    | \$0.00       |                                   |
| 4. Calculate gross income. Add line  |  | \$2,122.84                | \$0.00       |                                   |

 Official Form 106I
 Record #
 698385
 Schedule I: Your Income
 Page 1 of 2

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Debtor 1 Yolanda Ann Document Davis Pirst Name Middle Name Last Name

Page 29 of 60 Case Number (if known)

|               |                                 |   |              | For Debtor 1             |         | or Debtor 2 or<br>on-filing spouse |                       |
|---------------|---------------------------------|---|--------------|--------------------------|---------|------------------------------------|-----------------------|
| (             | Сору                            | line 4 here   | 4.           | \$2,122.84               |         | \$0.00                             |                       |
|               |                                 | payroll deductions:   |              |                          |         |                                    |                       |
|               |                                 | ax, Medicare, and Social Security deductions  | 5a.<br>      | \$266.50                 | _       | \$0.00                             |                       |
| į             | 5b. <b>N</b>                    | landatory contributions for retirement plans  | 5b.<br>—     | \$0.00                   | _       | \$0.00                             |                       |
| į             | 5c. <b>V</b>                    | oluntary contributions for retirement plans   | 5c.<br>_     | \$0.00                   | _       | \$0.00                             |                       |
|               | 5d. <b>R</b>                    | equired repayments of retirement fund loans   | 5d.          | \$0.00                   | _       | \$0.00                             |                       |
|               |                                 | surance   | 5e.<br>_     | \$0.00                   |         | \$0.00                             |                       |
| ţ             | of. D                           | omestic support obligations   | 5f.<br>—     | \$0.00                   | _       | \$0.00                             |                       |
| ţ             | 5g. <b>U</b>                    | nion dues   | 5g.<br>      | \$0.00                   |         | \$0.00                             |                       |
|               |                                 | ther deductions. Specify:   | 5h.<br>_     | \$0.00                   | _       | \$0.00                             |                       |
| 6. <b>Add</b> | l the                           | <b>payroll deductions</b> . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.  | 6.           | \$266.50                 | _       | \$0.00                             |                       |
| 7. Cal        | culat                           | e total monthly take-home pay. Subtract line 6 from line 4.   | 7.           | \$1,856.33               |         | \$0.00                             |                       |
| 8. List       | all c                           | other income regularly received:  | _            | _                        |         | _                                  |                       |
| 8             | Ва.                             | Net income from rental property and from operating a business,  |              |                          |         |                                    |                       |
|               |                                 | profession, or farm   |              |                          |         |                                    |                       |
|               |                                 | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total   |              |                          |         |                                    |                       |
|               |                                 | monthly net income.   | 8a.          | \$0.00                   |         | \$0.00                             |                       |
| 8             | Bb.                             | Interest and dividends  | 8b.          | \$0.00                   |         | \$0.00                             |                       |
| 8             | 3c.                             | Family support payments that you, a non-filing spouse, or a   | 8c.          | \$ 225.00                |         | \$ 0.00                            |                       |
|               |                                 | dependent regularly receive   |              |                          |         |                                    |                       |
|               |                                 | Include alimony, spousal support, child support, maintenance, divorce   |              |                          |         |                                    |                       |
|               |                                 | settlement, and property settlement.  |              |                          |         |                                    |                       |
| 8             | 3d.                             | Unemployment compensation   | 8d.          | \$0.00                   |         | \$0.00                             |                       |
| 8             | Зe.                             | Social Security   | 8e.          | \$529.00                 |         | \$0.00                             |                       |
| 8             | Bf.                             | Other government assistance that you regularly receive  | 8f.          | \$0.00                   |         | \$0.00                             |                       |
|               |                                 | Include cash assistance and the value (if known) of any non-cash  |              |                          |         |                                    |                       |
|               |                                 | assistance that you receive, such as food stamps (benefits under the  |              |                          |         |                                    |                       |
|               |                                 | Supplemental Nutrition Assistance Program) or housing subsidies.  |              |                          |         |                                    |                       |
|               |                                 | Specify:  |              |                          |         |                                    |                       |
| 8             | ßg.                             | Pension or retirement income  | 8g.          | \$0.00                   |         | \$0.00                             |                       |
| 8             | 3h.                             | Other monthly income. Specify:  | 8h.          | \$0.00                   |         | \$0.00                             |                       |
| 9.            | Add                             | all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.   | 9            | \$754.00                 | _       | \$0.00                             |                       |
| 10.           | Calc                            | ulate monthly income. Add line 7 + line 9.  | 10.          | \$2,610.33               |         | \$0.00                             | \$2,610.33            |
| ,             | Add t                           | he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | L            | Ψ2,010.00                | _       | ψ0.00                              | φ2,010.33             |
| <br>          | nclud<br>other<br>Do no<br>Spec | all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, you friends or relatives.  It include any amounts already included in lines 2-10 or amounts that are notify: | our dependen | p pay expenses listed in |         |                                    | 11\$0.00              |
|               |                                 | the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Ce   |              | •                        | t appli | es                                 | 12. <b>\$2,610.33</b> |
|               |                                 | ou expect an increase or decrease within the year after you file this form  |              | ,                        | • •     |                                    |                       |
|               | χN                              |   |              |                          |         |                                    |                       |

Filed 02/10/16 Case 16-04021 Doc 1 Entered 02/10/16 09:37:43 Page 30 of 60 Document Fill in this information to identify your case: Ann Davis Check if this is: Yolanda Debtor 1 Middle Name Last Name First Name An amended filing Debtor 2 A supplement showing post-petition chapter 13 First Name (Spouse, if filing) Middle Name Last Name income as of the following date: United States Bankruptcy Court for the : <u>NORTHERN DISTRICT OF ILLIN</u>OIS MM / DD / YYYY Case Number (If known) A separate filing for Debtor 2 because Debtor 2 Official Form 106J maintains a separate household. Schedule J: Your Expenses 12/14 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every **Describe Your Household** 1. Is this a joint case? X No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Nο Yes. Debtor 2 must file a separate Schedule J. Do you have dependents? No Dependent's relationship to Does dependent live Dependent's Debtor 1 or Debtor 2 with you? age Do not list Debtor 1 and Yes. Fill out this information for No Debtor 2. each dependent..... Daughter 25 X Yes Do not state the dependents' names Nο Son 15 Х Yes Grandson 1 Х res ( X No Yes Х No Do your expenses include No expenses of people other than yourself and your dependents? **Estimate Your Ongoing Monthly Expenses** Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report

Part 2:

question.

Part 1:

expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Include expenses paid for with non-cash government assistance if you know the value

Homeowner's association or condominium dues

The rental or home ownership expenses for your residence. Include first mortgage payments and \$1,083.00 any rent for the ground or lot. If not included in line 4: Real estate taxes \$0.00 4a. \$0.00 Property, homeowner's, or renter's insurance \$0.00 Home maintenance, repair, and upkeep expenses 4c.

Your expenses

4d.

\$0.00

Official Form 106J Record # 698385 Schedule J: Your Expenses Page 1 of 3 Case 16-04021 Doc 1 Filed 02/10/16 Entered 02/10/16 09:37:43 Desc Main Document Page 31 of 60

Ann

Last Name

Middle Name

Yolanda

First Name

Debtor 1

Case Number (if known) \_

|     |   |         | Your expense | es       |
|-----|---|---------|--------------|----------|
| 5.  | Additional Mortgage payments for your residence, such as home equity loans                            | -<br>5. |              | \$0.00   |
| 6.  | Utilities:  |         |              |          |
|     | 6a. Electricity, heat, natural gas  | 6a.     |              | \$160.00 |
|     | 6b. Water, sewer, garbage collection  | 6b.     |              | \$0.00   |
|     | 6c. Telephone, cell phone, internet, satellite, and cable service                                     | 6c.     |              | \$180.00 |
|     | 6d. Other. Specify:   | 6d.     | \$           | 0.00     |
| 7.  | Food and housekeeping supplies  | 7.      |              | \$444.00 |
| 8.  | Childcare and children's education costs  | 8.      |              | \$0.00   |
| 9.  | Clothing, laundry, and dry cleaning   | 9.      |              | \$35.00  |
| 10. | Personal care products and services   | 10.     |              | \$60.00  |
| 11. | Medical and dental expenses   | 11.     |              | \$25.00  |
| 12. | <b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.     | 12.     |              | \$98.00  |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books                                    | 13.     |              | \$0.00   |
| 14. | Charitable contributions and religious donations  | 14.     |              | \$0.00   |
| 15. | Insurance.  |         |              |          |
|     | Do not include insurance deducted from your pay or included in lines 4 or 20.                         |         |              |          |
|     | 15a. Life insurance   | 15a.    |              | \$0.00   |
|     | 15b. Health insurance   | 15b.    |              | \$0.00   |
|     | 15c. Vehicle insurance  | 15c.    |              | \$0.00   |
|     | 15d. Other insurance. Specify:  | 15d.    |              | \$0.00   |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.                      |         |              |          |
|     | Specify:  | 16.     |              | \$0.00   |
| 17. | Installment or lease payments:  |         |              |          |
|     | 17a. Car payments for Vehicle 1   | 17a.    |              | \$0.00   |
|     | 17b. Car payments for Vehicle 2   | 17b.    |              | \$0.00   |
|     | 17c. Other. Specify:  | 17c.    |              | \$0.00   |
|     | 17d. Other. Specify:  | 17d.    |              | \$0.00   |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted                |         |              |          |
|     | from your pay on line 5, Schedule I, Your Income (Official Form 106I).                                | 18.     |              | \$0.00   |
| 19. | Other payments you make to support others who do not live with you.                                   |         |              |          |
|     | Specify:  | 19.     |              | \$0.00   |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. |         |              |          |
|     | 20a. Mortgages on other property  | 20a.    | \$           | 0.00     |
|     | 20b. Real estate taxes  | 20b.    | \$           | 0.00     |
|     | 20c. Property, homeowner's, or renter's insurance   | 20c.    | \$           | 0.00     |
|     | 20d. Maintenance, repair, and upkeep expenses   | 20d.    | \$           | 0.00     |
|     | 20e. Homeowner's association or condominium dues  | 20e.    | \$           | 0.00     |

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Yolanda Ann Debtor 1 Case Number (if known) \_ First Name Middle Name Last Name \$15.00 21. Other. Specify: \_\_\_Postage/Bank Fees (\$15.00), 21. \$2,100.00 22.. Your monthly expense: Add lines 4 through 21. 22. The result is your monthly expenses. 23. Calculate your monthly net income. \$2,610.33 23a. 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$2,100.00 23b. Copy your monthly expenses from line 22 above. 23b.-\$510.33 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Explain Here: Yes.

Official Form 106J Record # 698385 Schedule J: Your Expenses Page 3 of 3

| Fill in this in           | Fill in this information to identify your case: |                                   |                              |  |  |
|---------------------------|---|-----------------------------------|------------------------------|--|--|
| Debtor 1                  | Yolanda   | Ann                               | Davis                        |  |  |
|                           | First Name                                      | Middle Name                       | Last Name                    |  |  |
| Debtor 2                  | -   |                                   |                              |  |  |
| (Spouse, if filing)       | First Name                                      | Middle Name                       | Last Name                    |  |  |
| United States             | Bankruptcy Court for t                          | the : <u>NORTHERN</u> District of | _ <u>ILLINOIS</u><br>(State) |  |  |
| Case Number<br>(If known) |   |                                   |                              |  |  |

## Official Form 106 Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below   |   |
|--|---|
| Did you pay or agree to pay someone who is NOT ar        | n attorney to help you fill out bankruptcy forms?   |
| No   | Attack Barlininkov Batilian Branconda Natica Barlininkov and                                  |
| Yes. Name of Person                                      | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|  |   |
|  |   |
| Under negative of perjury I declare that I have read the | ne summary and schedules filed with this declaration and that they are true and               |
| correct.   | is summary and senedates med with this declaration and that they are that and                 |
| 🗶 /s/ Yolanda Ann Davis                                  | <b>x</b>  |
| Signature of Debtor 1                                    | Signature of Debtor 2   |
| <sub>Date</sub> 02/08/2016                               | Date  |
| MM / DD / YYYY   | MM / DD / YYYY  |
|  |   |

| Fill in this in           | formation to ident   |                                   |                  |
|---------------------------|----------------------|-----------------------------------|------------------|
| Debtor 1                  | Yolanda              | Ann                               | Davis            |
| Debtor 2                  | First Name           | Middle Name                       | Last Name        |
| (Spouse, if filing)       | First Name           | Middle Name                       | Last Name        |
| United States             | Bankruptcy Court for | the : <u>NORTHERN</u> District of | ILLINOIS (State) |
| Case Number<br>(If known) | ·                    |                                   |                  |

# Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| number (   | if known). Answer every question.             |                               |                  |                               |  |  |  |  |
|--|---|-------------------------------|------------------|-------------------------------|--|--|--|--|
| Part 1   | Give Details About Your Marital Status and Wh | nere You Lived Before         |                  |                               |  |  |  |  |
| 01. <b>Wh</b>  | at is your current marital status?            |                               |                  |                               |  |  |  |  |
| Married  |   |                               |                  |                               |  |  |  |  |
| _  | Not married                                   |                               |                  |                               |  |  |  |  |
|  | Not married                                   |                               |                  |                               |  |  |  |  |
| 02 During the last 3 years, have you lived anywhere other than where you live now?   |   |                               |                  |                               |  |  |  |  |
| □ No.  |   |                               |                  |                               |  |  |  |  |
| Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  |   |                               |                  |                               |  |  |  |  |
|  |   |                               |                  |                               |  |  |  |  |
|  | Debtor 1                                      | Dates Debtor 1<br>lived there | Debtor 2:        | Dates Debtor 2<br>lived there |  |  |  |  |
|  |   | nved there                    | Same as Debtor 1 | Same as Debtor 1              |  |  |  |  |
|  | 7518 S Peoria St                              | FROM 12/2007                  |                  |                               |  |  |  |  |
|  | Chicago IL 60620-2846                         | To 11/2013                    |                  |                               |  |  |  |  |
|  |   |                               |                  |                               |  |  |  |  |
|  |   |                               |                  |                               |  |  |  |  |
| 03 Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community |   |                               |                  |                               |  |  |  |  |
| property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington,     |   |                               |                  |                               |  |  |  |  |
| and Wisconsin.)  |   |                               |                  |                               |  |  |  |  |
| ■ No. □ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).   |   |                               |                  |                               |  |  |  |  |
| - 100. Maile date you fill out conteade 11. Total codebiols (Chicket Form 1001).   |   |                               |                  |                               |  |  |  |  |
|  |   |                               |                  |                               |  |  |  |  |
| Part 2: Explain the Sources of Your Income   |   |                               |                  |                               |  |  |  |  |
|  |   |                               |                  |                               |  |  |  |  |
|  |   |                               |                  |                               |  |  |  |  |
|  |   |                               |                  |                               |  |  |  |  |
|  |   |                               |                  |                               |  |  |  |  |
|  |   |                               |                  |                               |  |  |  |  |
|  |   |                               |                  |                               |  |  |  |  |
|  |   |                               |                  |                               |  |  |  |  |
|  |   |                               |                  |                               |  |  |  |  |
|  |   |                               |                  |                               |  |  |  |  |
|  |   |                               |                  |                               |  |  |  |  |

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Ann

Debtor 1 Yolanda Davis Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income Gross income Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$969.73 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, \$44,000 Wages, commissions, For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business Wages, commissions, \$44,957 Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2014) Operating a business Operating a business

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Case Number (if known)

Davis

First Name Middle Name Last Name 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income Gross income Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Child Support \$2,700 From January 1 of current year until the date you filed for bankruptcy: Social Security \$6,348 From January 1 of current year until Disability for Minor the date you filed for bankruptcy: Child Child Support \$2,700 For last calendar year: (January 1 to December 31, 2015) Social Security \$6,348 For last calendar year: Disability for Minor (January 1 to December 31, 2015) Child Child Support \$2,700 For last calendar year: (January 1 to December 31, 2014) Social Security \$6,348 For last calendar year: Disability for Minor (January 1 to December 31, 2014) Child Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

Debtor 1

Yolanda

Ann

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| ebto | or 1 Yolanda  | Ann  | Davis                   |                              | Case Number (if known)      |  |  |  |  |  |
|------|---|--|-------------------------|------------------------------|-----------------------------|--|--|--|--|--|
|      | First Name  | Middle Name  | Last Name               |                              |                             |  |  |  |  |  |
| 06   | Are either Debtor 1's or Debto                                    | or 2's debts primarily co  | nsumer debts?           |                              |                             |  |  |  |  |  |
|      |   |  |                         |                              |                             |  |  |  |  |  |
|      | No. Neither Debtor 1 nor  | · · · · · · · · · · · · · · · · · · ·  |                         |                              | ned in 11 U.S.C. § 101(8) a | is   |  |  |  |  |
|      | •   | lual primarily for a persor  | -                       | • •                          |                             |  |  |  |  |  |
|      | During the 90 days be   | fore you filed for bankrup   | otcy, did you pay ar    | ny creditor a total of \$6,2 | 225* or more?               |  |  |  |  |  |
|      | No. Go to line 7.   |  |                         |                              |                             |  |  |  |  |  |
|      | ☐ Yes. List below ea  | ach creditor to whom you   | ı paid a total of \$6,2 | 225* or more in one or m     | nore payments and the       |  |  |  |  |  |
|      | total amount you  | paid that creditor. Do not alimony. Also, do not inc   | include payments        | for domestic support ob      | ligations, such as          |  |  |  |  |  |
|      | * Subject to adjustment on  | -  |                         | -                            | · ·                         |  |  |  |  |  |
|      | Yes. Debtor 1 or Debtor 2   |  |                         |                              | 00                          |  |  |  |  |  |
|      | _   | efore you filed for bankru   | uptcy, did you pay a    | any creditor a total of \$60 | ou or more?                 |  |  |  |  |  |
|      | ☐ No. Go to line 7.   |  |                         |                              |                             |  |  |  |  |  |
|      | Yes. List below ea  | Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that |                         |                              |                             |  |  |  |  |  |
|      | creditor. Do not in   | creditor. Do not include payments for domestic support obligations, such as child support and              |                         |                              |                             |  |  |  |  |  |
|      | alimony. Also, do   | not include payments to  | an attorney for this    | bankruptcy case.             |                             |  |  |  |  |  |
|      |   |  |                         |                              |                             |  |  |  |  |  |
|      |   |  | Dates of                | Total amount paid            | Amount you still            | owe Was this payment for                           |  |  |  |  |
|      |   |  | payments                |                              |                             |  |  |  |  |  |
|      |   |  |                         |                              |                             |  |  |  |  |  |
|      | Wells Fargo F   | HM Mortgag 8480  | Monthly                 | \$ 3,252                     | \$ 101,489                  | Mortgage   |  |  |  |  |
|      | Stagecoach C  | Cir Frederick MD   |                         |                              |                             | Car  |  |  |  |  |
|      | 21701   |  |                         |                              |                             | Credit card  |  |  |  |  |
|      |   |  |                         |                              |                             | Loan repayment                                     |  |  |  |  |
|      |   |  |                         |                              |                             | Suppliers or vendors                               |  |  |  |  |
|      |   |  |                         |                              |                             | Other  |  |  |  |  |
|      |   |  |                         |                              |                             |  |  |  |  |  |
|      |   |  |                         |                              |                             |  |  |  |  |  |
| 07   | Within 1 year before you filed f                                  | or hankruntov, did vou m   | ake a navment on a      | a debt you owed anyone       | who was an insider?         |  |  |  |  |  |
| 01   | Insiders include your relatives;                                  |  |                         | •                            |                             | al partner;  |  |  |  |  |
|      | corporations of which you are a                                   |  |                         |                              |                             | , , ,  |  |  |  |  |
|      | agent, including one for a busing such as child support and alime | •  | le proprietor. 11 U.    | S.C. § 101. Include payı     | ments for domestic suppor   | t obligations,                                     |  |  |  |  |
|      | No.   |  |                         |                              |                             |  |  |  |  |  |
|      | Yes. List all payments to a                                       | n insider.   |                         |                              |                             |  |  |  |  |  |
|      |   |  | Dates of                | Total amount                 | Amount you still            | Reason for this payment                            |  |  |  |  |
|      |   |  | payment                 | paid                         | owe                         |  |  |  |  |  |
| 08   | Within 1 year before you filed f                                  | or hankruntov, did vou m   | ake any nayments        | or transfer any property     | on account of a debt that   | henefited  |  |  |  |  |
|      | an insider?   | or barin aptoy, and you m  | and any paymente        | or transfer any property     | on account of a dopt that   | Johnston   |  |  |  |  |
|      | Include payments on debts gua                                     | aranteed or cosigned by  | an insider.             |                              |                             |  |  |  |  |  |
|      | No.   |  |                         |                              |                             |  |  |  |  |  |
|      | Yes. List all payments to a                                       | n insider.   |                         |                              |                             |  |  |  |  |  |
|      |   |  | Dates of payment        | Total amount paid            | Amount you still owe        | Reason for this payment<br>Include creditor's name |  |  |  |  |
|      |   |  | payment                 | paid                         | OWE                         | include creditor 3 name                            |  |  |  |  |
| P    | Identify Legal actions,   | Repossessions, and Fore  | eclosures               |                              |                             |  |  |  |  |  |
|      |   |  |                         |                              |                             |  |  |  |  |  |
|      |   |  |                         |                              |                             |  |  |  |  |  |
|      |   |  |                         |                              |                             |  |  |  |  |  |

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| Dept | or 1   | Tolaliua  | AIIII   | Davis                            | Case Number (If Known)  |                    |  |  |
|------|--|---|---|----------------------------------|---|--------------------|--|--|
|      |  | First Name  | Middle Name                                       | Last Name                        |   |                    |  |  |
| 09   | List   | all such matters, including lifecations, and contract | ding personal injury case                         |                                  | rt action, or administrative proceeding? es, collection suits, paternity actions, support or custod | у                  |  |  |
|      | Ш  | No.   |   |                                  |   |                    |  |  |
|      | •  | Yes. Fill in the details.                             |   |                                  |   |                    |  |  |
|      |  |   |   | Nature of the case               | Court or agency   | Status of the case |  |  |
|      |  | Legacy Loan Llc VS                                    | Yolanda Davis                                     | Collection                       | Second Municipal Division, Cook County  | Pending            |  |  |
|      |  |   |   | Concention                       |   | <b>=</b>           |  |  |
|      |  | CASE NUMBER#15N                                       | //24621   |                                  |   | On appeal          |  |  |
|      |  |   |   |                                  |   | Concluded          |  |  |
|      |  |   |   |                                  |   |                    |  |  |
|      |  |   |   |                                  |   |                    |  |  |
| 10   |  | nin 1 year before you fil                             |   | any of your property repossess   | ed, foreclosed, garnished, attached, seized, or levied?   |                    |  |  |
|      |  | No. Go to line 11                                     |   |                                  |   |                    |  |  |
|      | _  | Yes. Fill in the informat                             | ion helow   |                                  |   |                    |  |  |
|      | Ц  | res. i ili ili tile illioitilai                       | ion below.  |                                  |   |                    |  |  |
| 11   | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? |   |   |                                  |   |                    |  |  |
|      |  | No. Go to line 11                                     |   |                                  |   |                    |  |  |
|      | =  |   | ion holow   |                                  |   |                    |  |  |
| 40   | _  | Yes. Fill in the informat                             |   |                                  |   |                    |  |  |
| 12   |  |   | iled for bankruptcy, wa<br>a custodian, or anothe |                                  | possession of an assignee for the benefit of creditor   | s, a               |  |  |
|      | ١  | No.   |   |                                  |   |                    |  |  |
|      |  | res.  |   |                                  |   |                    |  |  |
|      |  |   |   |                                  |   |                    |  |  |
| F    | art 5  | List Certain Gifts a                                  | and Contributions                                 |                                  |   |                    |  |  |
| 13   | With   | nin 2 years before you                                | filed for bankruptcy, d                           | lid you give any gifts with a to | tal value of more than \$600 per person?  |                    |  |  |
|      |  | No.   |   |                                  |   |                    |  |  |
|      | _  |   |   |                                  |   |                    |  |  |
|      | _  | Yes. Fill in the details f                            | -   |                                  |   |                    |  |  |
| 14   | With   | nin 2 years before you                                | filed for bankruptcy, d                           | lid you give any gifts or contri | butions with a total value of more than \$600 to any c  | harity?            |  |  |
|      |  | No.   |   |                                  |   |                    |  |  |
|      | _  | Yes. Fill in the details f                            | or each gift                                      |                                  |   |                    |  |  |
|      | ш  | roo. r iii iir aro dotailo r                          | or odom gm.                                       |                                  |   |                    |  |  |
|      |  |   |   |                                  |   |                    |  |  |
| ŀ    | art 6:   | List Certain Losse                                    | s   |                                  |   |                    |  |  |
| 15   |  | nin 1 year before you f<br>nbling?                    | filed for bankruptcy or                           | since you filed for bankruptcy   | , did you lose anything because of theft, fire, other d   | lisaster, or       |  |  |
|      |  | No.   |   |                                  |   |                    |  |  |
|      | _  | Yes. Fill in the details f                            | or each gift.                                     |                                  |   |                    |  |  |
|      | ш  | . co are dotaine .                                    | o. o g  |                                  |   |                    |  |  |
|      |  |   |   |                                  |   |                    |  |  |
|      | art 7  | List Certain Paym                                     | ents or Transfers                                 |                                  |   |                    |  |  |
| 16   | abo  | ut seeking bankruptcy                                 | / or preparing a bankru                           | uptcy petition?                  | n your behalf pay or transfer any property to anyone  | you consulted      |  |  |
|      | Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.  |   |   |                                  |   |                    |  |  |
|      |  | No.   |   |                                  |   |                    |  |  |
|      | Yes. Fill in the details   |   |   |                                  |   |                    |  |  |
|      |  |   |   |                                  |   |                    |  |  |
|      |  |   |   |                                  |   |                    |  |  |
|      |  |   |   |                                  |   |                    |  |  |
|      |  |   |   |                                  |   |                    |  |  |
|      |  |   |   |                                  |   |                    |  |  |
|      |  |   |   |                                  |   |                    |  |  |
|      |  |   |   |                                  |   |                    |  |  |
|      |  |   |   |                                  |   |                    |  |  |
|      |  |   |   |                                  |   |                    |  |  |

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Page 39 of 60 Document Yolanda Ann Davis Case Number (if known) First Name Middle Name Last Name Description and value of any property transferred Amount of payment **Party Contact Info** Date payment or transfer Geraci Law L.L.C. Payment/Value: \$4,000.00: \$1,000.00 55 E. Monroe Street #3400 paid prior to filing, balance to be paid Chicago,IL 60603 through the plan. **Party Contact Info** Description and value of any property transferred Date payment Amount of payment or transfer Credit Counseling Services 2015 \$25.00 Hananwill Credit Counseling 115 N. Cross St Robinson, IL 62454 17 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No. Yes. Fill in the details. 18 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details for each gift. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  $\prod$  Yes. Fill in the details for each gift. List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved. closing or transfer or transferred 21 Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it?

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| Debtor | r 1   | Yolanda                      | Ann   | Davis  | Case Number (if known)   |                    |   |
|--------|-------|------------------------------|---|--|--|--------------------|---|
|        |       | First Name                   | Middle Name   | Last Name  |  |                    |   |
| 22     | Hav   | ve you stored prope          | erty in a storage unit o                                  | r place other than your home within                                | 1 year before you filed for bankruptcy?  |                    | _ |
|        |       | No.                          |   |  |  |                    |   |
|        | =     | Yes. Fill in the deta        | ilo   |  |  |                    |   |
|        | ш     | res. I ili ili tile deta     | iii 5.  | Who else has or had access to it?                                  | Describe the contents  | Do you still       |   |
|        |       |                              |   | Who else has of had access to it:                                  | bescribe the contents  | have it?           |   |
| Pa     | art 9 | Identify Proper              | rty You Hold or Control f                                 | or Someone Else  |  |                    |   |
|        |       |                              | <u> </u>  |  |  |                    | _ |
|        |       | you hold or control someone. | I any property that son                                   | neone else owns? Include any prope                                 | erty you borrowed from, are storing for, or  | hold in trust      |   |
|        |       | No.                          |   |  |  |                    |   |
|        |       | Yes. Fill in the deta        | ils.  |  |  |                    |   |
|        |       |                              |   | Where is the property?   | Describe the property  | Value              |   |
|        |       |                              |   |  |  |                    |   |
| Pa     | rt 10 | Give Details Al              | bout Environmental Info                                   | rmation  |  |                    |   |
| Fort   | the   | purpose of Part 10           | , the following definition                                | ons apply:   |  |                    |   |
| r      | naza  | ardous or toxic sub          | stances, wastes, or ma                                    | =  | ning pollution, contamination, releases of<br>water, groundwater, or other medium,<br>stes, or material. |                    |   |
|        |       | =                            | n, facility, or property a<br>ate, or utilize it, includi |  | law, whether you now own, operate, or ut   | ilize              |   |
|        |       |                              |   | onmental law defines as a hazardous<br>ntaminant, or similar term. | s waste, hazardous substance, toxic  |                    |   |
| Rep    | ort a | all notices, releases        | s, and proceedings tha                                    | at you know about, regardless of who                               | en they occurred.  |                    |   |
| 24     | Has   | any governmental             | I unit notified you that                                  | you may be liable or potentially liable                            | e under or in violation of an environmenta   | al law?            |   |
|        |       | No.                          |   |  |  |                    |   |
|        | =     | Yes. Fill in the deta        | ils   |  |  |                    |   |
|        | ш     |                              |   | Governmental unit  | Environmental law, if you know it  | Date of notice     |   |
|        |       |                              |   |  |  |                    |   |
| 25     | Hav   | e you notified any           | governmental unit of a                                    | any release of hazardous material?                                 |  |                    |   |
|        |       | No.                          |   |  |  |                    |   |
|        |       | Yes. Fill in the deta        | ils.  |  |  |                    |   |
|        |       |                              |   | Governmental unit  | Environmental law, if you know it  | Date of notice     |   |
| 26     |       |                              |   |  |  |                    |   |
| 20     | нач   | e you been a party           | in any judicial or adm                                    | inistrative proceeding under any en                                | vironmental law? Include settlements and   | orders.            |   |
|        |       | No.                          |   |  |  |                    |   |
|        |       | Yes. Fill in the deta        | ils.  |  |  |                    |   |
|        |       |                              |   | Court or agency  | Nature of the case   | Status of the case |   |
|        |       | a: 5 / 11 AU                 |   |  |  |                    |   |
| Pa     | rt 11 | Give Details Al              | bout Your Business or C                                   | onnections to Any Business   |  |                    |   |
| 27     | Wit   | hin 4 years before           | you filed for bankrupto                                   | cy, did you own a business or have a                               | ny of the following connections to any bu  | siness?            |   |
|        |       | A sole propriet              | or or self-employed in                                    | a trade, profession, or other activity                             | , either full-time or part-time  |                    |   |
|        |       | A member of a                | limited liability compa                                   | ny (LLC) or limited liability partnersh                            | nip (LLP)  |                    |   |
|        |       | A partner in a p             | partnership   |  |  |                    |   |
|        |       | An officer, direct           | ctor, or managing exec                                    | cutive of a corporation  |  |                    |   |
|        |       | =                            |   | or equity securities of a corporation                              |  |                    |   |
|        |       |                              |   |  |  |                    |   |
|        |       | No. None of the abo          | ove applies. Go to Part                                   | 12.  |  |                    |   |
|        |       | Yes. Check all that          | apply above and fill in t                                 | he details below for each business.                                |  |                    |   |
|        |       |                              |   |  |  |                    |   |
|        |       |                              |   |  |  |                    |   |
|        |       |                              |   |  |  |                    |   |
|        |       |                              |   |  |  |                    |   |

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| Debtor 1 | Yolanda                                     | Ann                            | Davis                             | Case Number (if known)  |  |
|----------|---|--------------------------------|-----------------------------------|---|--|
|          | First Name                                  | Middle Name                    | Last Name                         |   |  |
|          | hin 2 years before<br>titutions, creditors, |                                | you give a financial statement t  | o anyone about your business? Include all financial   |  |
|          | No.   |                                |                                   |   |  |
|          | Yes. Fill in the deta                       | nils.                          |                                   |   |  |
|          |   | Date iss                       | ued                               |   |  |
| Part 12  | Sign Below                                  |                                |                                   |   |  |
| in co    |   | nkruptcy case can result in fi | · · · · · · · · · · · · · · · · · | g property, or obtaining money or property by fraud<br>ment for up to 20 years, or both.          |  |
| ×        | /s/ Yolanda Ann                             | Davis                          | <b>x</b>                          |   |  |
|          | Signature of Debto                          | or 1                           | Signature of                      | Debtor 2  |  |
|          | Date 02/08/2016<br>MM / DD /                |                                | Date                              | DD / YYYY   |  |
| Did y    |   | al pages to Your Statement o   | f Financial Affairs for Individua | ls Filing for Bankruptcy (Official Form 107)?   |  |
|          | 'es   |                                |                                   |   |  |
| Did y    | ou pay or agree to                          | pay someone who is not an      | attorney to help you fill out ban | kruptcy forms?  |  |
| N        | lo  |                                |                                   |   |  |
| ı 🗆      | es. Name of person                          | on                             |                                   | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |  |

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In re              |  |  |                      |
|--------------------|--|--|----------------------|
| Yolanda A          | nn Davis / Debtor  | Case No:   |                      |
|                    |  | Chapter: Cha   | ipter 13             |
|                    | DISCLOSURE O   | OF COMPENSATION OF ATTORNEY FOR DEBTOR   | <u>:</u>             |
| compensati         | ion paid to me within one year before the fili   | 2016(b), I certify that I am the attorney for the above naming of the petition in bankruptcy, or agreed to be paid to me contemplation of or in connection with the bankruptcy can | e, for services      |
| For le             | egal services, I have agreed to accept   | \$4,000.00   |                      |
| Prior              | to the filing of this statement I have received  | d <u>\$1,000.00</u>  |                      |
| Balan              | nce Due  | \$3,000.00   |                      |
| 2. The so          | ource of the compensation paid to me was:  |  |                      |
|                    | Debtor(s) Other: (specify  |  |                      |
| 3. The so          | ource of compensation to be paid to me is:   |  |                      |
|                    | Debtor(s) Other: (specify  |  |                      |
| 4. I I of my law t | _  | d compensation with any other person unless they are men   | nbers and associates |
| I                  | have agreed to share the above-disclosed co  | ompensation with a other person or persons who are not me  | embers or associates |
|                    | urn for the above-disclosed fee, I have agreed including:  | d to render legal service for all aspects of the bankruptcy  |                      |
| a. A               | -  | and rendering advice to the debtor in determining whether t  | o file a petition in |
| b. P               | Preparation and filing of any petition, schedul  | eles, statements of affairs and plan which may be required;  |                      |
| c. R               | Representation of the debtor at the meeting of   | f creditors and confirmation hearing, and any adjourned he   | earings thereof;     |
| <b>6.</b> By ago   | reement with the debtor(s), the above-disclos  | sed fee does not include the following service:  |                      |
|                    |  |  |                      |
|                    | The sign of the si | CERTIFICATION  |                      |
|                    | payment to   | mplete statement of any agreement or arrangement for   |                      |
|                    | me for representation of the debtor(s)   |  |                      |
|                    | Date: 01/25/2016   | /s/ Steven Scott Camp  |                      |
|                    | Date   | Signature of Attorney  |                      |
|                    |  | Geraci Law L.L.C.  |                      |

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Name of law firm

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### UNITED STATES BANKRIEP BOY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



- Case 16-04021 Doc 1 Filed 02/10/16 Entered 02/10/16 09:37:43 Desc Mair 3. Personally review with the debtor **Endsignethe** con**Palgred position**, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO



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1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



- Case 16-04021 Doc 1 Filed 02/10/16 Entered 02/10/16 09:37:43 Desc Main 2. Inform the debtor that the debtor nuscben and true Pande i46hef ase of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.



CARA Page 4 of 7

# Case 16-04021 Doc 1 Filed 02/10/16 Entered 02/10/16 09:37:43 Desc Main C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
  - The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



- Case 16-04021 Doc 1 Filed 02/10/16 Entered 02/10/16 09:37:43 Desc Mair (d) Any portion of the retainer that is unoterated to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4.000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00

| 3. Before signing this agreement, the attorney has rece | ived ,\$ <u>1000.00</u> | <u> </u> |               |
|---|-------------------------|----------|---------------|
| toward the flat fee, leaving a balance due of \$3000.   | 00 ; and \$             | 310.00   | for expenses, |
| leaving a balance due for the filing fee of \$0.00      |                         |          |               |



Case 16-04021 Doc 1 Filed 02/10/16 Entered 02/10/16 09:37:43 Desc Main 4. In extraordinary circumstances, subpatiented exigentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 12 , 3 , 15

Signed:

Jalando Jaul

Co-Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

Case 16-04021 Doc 1 File Geradid 200 Lelin Gred 02/10/16 09:37:43 Desc Main National Headquarters: 55 E. Monroe Stee C #13100 lothicago Plagge 05 0 15766 925-1313 help@geracilaw.com



Consultation Attorney · CMP Date: 12/3/2015

Record # 698-385

### **Attorney - Client Agreement**

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter 13 bankruptcy under the following terms and conditions. I have signed and received a copy the "Court Approved Retention Agreement" (CARA) between Chapter 13 Debtors and their Attorneys" as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. I understand I must comply with those terms. Attorney fees for filed Chapter 13 Bankruptcy shall be the fee stated in the CARA I have received the 11U.S.C § 527(a) disclosures. I have been advised of my chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more. More than one attorney and paralegal will work on my case.

FEES: This does NOT INCLUDE court filing fees of \$310, costs for credit counseling or financial management classes. Any amount not paid prior to the case being filed shall be paid through the Chapter 13 Trustee. These fees are fixed, but the attorneys may apply to the court for additional fees if allowed by the CARA or other circumstances, such as extended evidentiary hearings, contested adversary proceedings or appeals. If the Court awards additional fees, they will also be paid through the Chapter 13 Trustee. Fees are "flat fees" and "advance payment retainers" for pre-filing and pre-confirmation work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.

No other work: Geraci Law is not representing me in state or other courts regarding creditors in my bankruptcy. Any state court action not stopped by the Automatic Stay of a filed bankrutpcy is my responsibility.

Injury or other claims or property I must disclose any such claims or propery I now have or acquire after filing Chapter 13 to both the Chapter 13 trustee and to the court in a filed amendment and obtain authority to keep them or pay those claims to the Trustee.

PLAN: The plan payment is estimated to be \$\frac{36}{255}\$ per month for \$\frac{36}{255}\$ months. The payment and length of the plan are based on the information I have provided, including income, expenses, assets and debts. If these amounts are not accurate, my plan \_\_ months. The payment and length of the plan are payment or duration may need to be increased. In addition, the Court, Chapter 13 Trustee or creditors could object to my proposed Chapter 13 payment, which may cause it to increase. I further understand that if my income or expenses change during my Chapter 13, my plan payment may have to change. I agree to read my petition and plan and study it before signing it so I know what is included, INCLUDING what I am listing as debts, what my property is, what my assets are and if they are claimed as exempt, and to make full disclosure.

My plan payment DOES include the following, unless stated otherwise: mortgage arrears; association arrears; vehicles; tax debt; support obligations that are post due (but not future) parking tickets (not traffic fines); debts pursuant to a divorce decree/marital settlement you listed; other secured debts including furniture, electronics, etc.; all other unsecured debts;

My plan payment does NOT include include future mortgage, rent, condo fees and support payments; criminal fines/court fees; rent/lease arrears; student loan principal and interest unless 100% planned to unsecured creditors, sold property taxes; debts incurred after the case is filed, including any association fees as long as the property is in my name; other

Student loans: are usually NEVER paid 100% in a Chapter 13, but are paid the same percentage as unsecured creditors without interest, so my student loans will CONTINUE to accrue interest, and if I don't pay them directly they will be even larger at the end of the plan, so I have been told about this and I will deal with my student loans myself directly

Debts not discharged if they not paid in full: student loans; educational debts; unfiled or late filed tax debts; undisclosed debts; support/maintenance debts; debts incurred by fraud, or debts listed in your red folder or found non-dischargeable by a Judge. Representation limited to Bankruptcy Court We do not represent you in state court, or in loan modifications or similar matters. If I am eligible to receive a tax refund during my Chapter 13, I understand I must turn it over to the Chapter 13 Trustee unless I am specifically advised that I do not need to. This may change on a yearly basis, so I must check with my attorneys every year. I also understand that if I receive any significant sums of money other than through employment, including but not limited to life insurance proceeds, workers compensation award, personal injury or other court settlement, I MUST notify my attorney immediately and I may have to pay some or all of the funds into my Chapter 13 plan.

I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition. If I fail to remain current in a domestic support obligation, fail to certify to the Court that I have remained current, or if I fail to take my financial management class, that my case may be closed without a discharge, and I will be required to pay a fee to have it reopened.

(Joint Debtor) Dated: 12/3/15 alanda Davis (Debtor)

Representing Geraci Law L.L.C. orney for the Debtor(s)

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## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

| Yolanda Ann Davis / Debtor | Bankruptcy Docket #: |
|----------------------------|----------------------|

Judge:

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 02/08/2016 /s/ Yolanda Ann Davis

**Yolanda Ann Davis** 

X Date & Sign

Record # 698385 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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Desc Main

B 201A (Form 201A) (11/11)

#### UNITED STATES BANKRUPTCY COURT

## NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

In re Yolanda Ann Davis

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Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

#### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 02/08/2016 | ISI YOIANGA ANN DAVIS       |   |  |
|-------------------|-----------------------------|---|--|
|                   | Yolanda Ann Davis           |   |  |
| Dated: 01/25/2016 | /s/ Steven Scott Camp       |   |  |
|                   | Attorney: Steven Scott Camp | — |  |

Form B 201A. Notice to Consumer Debtor(s) Record # 698385 Page 2 of 2

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| Debtor | 1                                 | Yolanda<br>First Name   | ANN<br>Middle Name                                      | Davis<br>Last Name   | _ Ca   | se Number (if known)                          |  |
|--------|-----------------------------------|---|---|--|--|---|--|
| Part   | 6:                                | Answer These Questions  | for Reporting Pur                                       | poses  |  |   |  |
|        |                                   | at kind of debts do<br>have?  | as "incur   |  | umer debts? Consumer of the co |   |  |
|        |                                   |   | 16b. <b>Are you</b> money fo                            | Go to line 17.  If debts primarily busing a business or investment Go to line 18c.  Go to line 17. | ess debts? Business del<br>cor through the operation o   | ots are debts that yo                         | ou incurred to obtain<br>vestment.   |
|        |                                   |   |   |  | t are not consumer debts o   | r business debts.                             |  |
|        |                                   |   |   |  |  |   |  |
| 17.    |                                   | you filing under<br>opter 7?  | No. ia  | m not filing under Chapter   | 7. Go to line 18.  |   |  |
|        | any<br>excl<br>adm<br>are<br>avai | you estimate that after exempt property is luded and ninistrative expenses paid that funds will be liable for distribution insecured creditors? | adi   | m filing under Chapter 7. E<br>ministrative expenses are p<br>No.<br>Yes.                          | o you estimate that after a<br>paid that funds will be availa  | ny exempt property<br>able to distribute to u | is excluded and<br>unsecured creditors?  |
| 18.    |                                   | v many creditors do<br>estimate that you<br>e?  | 1-49<br>50-99<br>100-199<br>200-999                     |  | ☐ 1,000-5,000<br>☐ 5,001-10,000<br>☐ 10,001-25,000   |   | □ 25,001-50,000<br>□ 50,001-100,000<br>□ More than 100,000   |
| 19.    | esti                              | v much do you<br>mate your assets to<br>worth?  | \$0-\$50,0<br>\$50,001<br>\$100,00<br>\$500,00          | \$100,000<br>1-\$500,000   | \$1,000,001-\$10 millior<br>\$10,000,001-\$50 millio<br>\$50,000,001-\$100 mill<br>\$100,000,001-\$500 mil   | on<br>ion                                     | □\$500,000,001-\$1 billion □\$1,000,000,001-\$10 billion □\$10,000,000,001-\$50 billion □More than \$50 billion  |
|        |                                   | v much do you<br>mate your liabilities<br>e?  | □ \$0-\$50,00<br>□ \$50,001<br>■ \$100,00<br>□ \$500,00 | \$100,000<br>1-\$500,000   | ☐\$1,000,001-\$10 millior ☐\$10,000,001-\$50 millio ☐\$50,000,001-\$100 mill ☐\$100,000,001-\$500 mil  | on<br>ion                                     | □\$500,000,001-\$1 billion □\$1,000,000,001-\$10 billion □\$10,000,000,001-\$50 billion □ More than \$50 billion |
| Part   | 7:                                | Sign Below  |   |  | •  |   |  |
| Fory   | /ou                               |   | I have examin correct.                                  | ed this petition, and I decla  | re under penalty of perjury  | that the information                          | provided is true and   |
|        |                                   |   |   | ted States Code. I understa  | am aware that I may proce<br>and the relief available unde   |   |  |
|        |                                   |   |   |  | pay or agree to pay some<br>the notice required by 11 U  |   | ttomey to help me fill out   |
|        |                                   |   | l understand n<br>with a bankrup                        | naking a false statement, c  | up to \$250,000, or impriso  | ining money or prop                           | erty by fraud in connection  |
|        |                                   |   | X Signatur  | landa D  | <u>aint</u>  | Signature of I                                | Debtor 2   |
|        |                                   |   | Execute   | d on : 1 / 25 /201<br>MM / DD / YYY  | 5<br>Y   | Executed on                                   | MM / DD / YYYY   |

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| Fill m this in                  | formation to identi    | fy your case:                   |   |   |       |
|---------------------------------|------------------------|---------------------------------|---|---|-------|
| Debtor 1                        | Yolanda                | ANN                             | Davis   |   |       |
| D.11                            | First Name             | Middle Name                     | Last Name   |   |       |
| Debtor 2<br>(Spouse, if filing) | First Name             | Middle Name                     | Last Name   |   |       |
| United States                   | Bankruptcy Court for t | he: <u>NORTHERN</u> District of | LLINOIS   |   |       |
| Case Number                     |                        |                                 | (State)   |   |       |
| (if known)                      |                        |                                 | · · · · · · · · · · · · · · · · · · ·                       | Check if this is an amended filing  |       |
|                                 |                        |                                 |   |   |       |
|                                 |                        |                                 |   |   |       |
| Official Fo                     | <u>orm 106 De</u>      | e <b>C</b>                      |   |   |       |
|                                 |                        |                                 | Debtor's Schedu   | •1  |       |
|                                 | NOI ADOUL              | an muividual L                  | reptor's schedu   | iles  | 12/15 |
| two married p                   | eople are filing tog   | ether, both are equally resp    | onsible for supplying correc                                | t information.  |       |
| ou must file th                 | ie form whonever w     | an dia bankanatan askadul       | · · · · · · · · · · · · · · · · · ·                         |   |       |
| btaining mone                   | v or property by fra   | ud in connection with a bar     | 85 Of Amended Schedules, M<br>rkminter case can result in f | laking a false statement, concealing property, or<br>ines up to \$250,000, or imprisonment for up to 20 |       |
| ears, or both.                  | B U.S.C. §§ 152, 13    | 41, 1519, and 3571.             | портој одве одн геоди и н                                   | ries up to \$250,000, or imprisonment for up to 20  |       |
|                                 |                        |                                 |   |   |       |
|                                 | ign Below              | ·                               |   |   |       |
| Did vou nav                     | or eares to nev cor    | noone who is NOT as see-        | ney to help you fill out bankr                              |   |       |
| No No                           | an agree to pay go:    | HOUSE MILO IS NO. 811 SKOTT     | tey to neip you till out bank?                              | uptcy forms?  |       |
|                                 |                        |                                 |   |   |       |
| ∐ Yes. N                        | ame of Person          |                                 | ·   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and  |       |
|                                 |                        |                                 |   | Signature (Official Form 119).  |       |
|                                 |                        |                                 |   |   |       |
|                                 |                        |                                 |   |   |       |
|                                 |                        |                                 |   |   |       |
| Under penalt                    | y of perjury, I decla  | re that I have read the sum     | mary and schedules filed wi                                 | th this declaration and that they are true and  |       |
| correct.                        |                        | ~                               | ,   | and desired and that they are nite and  |       |
| λ . Λ                           | Λ (                    | ) .                             |   |   |       |
| x                               | anda i                 | Louis                           | ×   |   |       |
| Signature                       | of Debtor 1            |                                 | Signature of Debtor   | 2   |       |
| Dete '                          | 125,0015               |                                 |   | •   |       |
| Date :<br>MM                    | / DD / YYYY            |                                 | Date  | <del></del>   |       |

MM / DD / YYYY

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| neptor . |   | ANN   | Davis  | Case Number (if known)  |             |  |  |
|----------|---|---|--|---|-------------|--|--|
|          | First Name  | Middle Name                                       | Last Name  | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \   |             |  |  |
| 28 y     | Vithin 2 years before yourstitutions, creditors, o  | ou filed for bankruptcy, die<br>or other parties. | d you give a financial statement   | o anyone about your business? Include all financial   | Married San |  |  |
|          | Yes. Fill in the details  | ı.  |  |   |             |  |  |
| Part     |   | Par II  | tired San  |   |             |  |  |
| Fell     | 12: Sign Below  |   |  |   |             |  |  |
| in 6     | Signature of Debtor 1  Date MM / DD / Y   | ruptcy case can result in 19, and 3571.           | Ging a false statement, concealing fines up to \$250,000, or imprison Signature of I | DD / YYYY   |             |  |  |
| Did      | you attach additional (   | pages to Your Statement o                         | of Financial Affairs for Individua   | s Filing for Bankruptcy (Official Form 107)?  |             |  |  |
|          | No<br>Yes   |   |  |   |             |  |  |
| Did      | Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? |   |  |   |             |  |  |
|          | No  |   |  |   |             |  |  |
|          | Yes. Name of person   |   |  | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |             |  |  |

### **DISCLAIMER** Debtors have read and agree:

- Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entityin connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarentee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are 3 not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in Installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filling of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filling. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment. 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community
- property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors, a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Tum condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case

| Dated: 1 / 1/2015 | Manda Jaus        | *** Xipate 8: Sima |
|-------------------|-------------------|--------------------|
| ·                 | Yolanda ANN Davis |                    |

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## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Yolanda ANN Davis / Debtor

Bankruptcy Docket #:

Judge:

#### VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

Dated: 1, 25 /2015 Yolanda Dais DELES SIGNS

Yolanda ANN Davis

\* Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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| 16. Calculate the median family income that applies to you. Follow these steps:   |  |
|---|--|
| 16a. Fill in the state in which you live.   |  |
| 16b. Fill in the number of people in your household.  |  |
| 16c. Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.   | 13. \$86,818.00  |
| 17. How do the lines compare?   |  |
| 17a. Ine 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 22C-2).   | r 11 U.S.C   |
| 17b. Ine 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.                              |  |
| Part 3: Calculate Your Commitment Period Under 11 U.S.C. 91325(b)(4)  |  |
| 18. Copy your total average monthly income from line 11.  | \$2 247 94   |
| 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13d. If the marital adjustment does not apply, fill in 0 on line 19a. | \$2,347.84   |
| Subtract line 19a from line 18.   | \$0.00   |
|   | \$2,347.84   |
| 20. Calculate your current monthly income for the year. Follow these steps:   |  |
| 20a. Copy line 19b.   | \$2,347.84   |
| Multiply by 12 (the number of months in a year).  | x 12   |
| 20b. The result is your current monthly income for the year for this part of the form.  | \$28,174.08  |
| 20c. Copy the median family income for your state and size of household from line 16c   | \$86,818.00  |
| 21. How do the lines compare?   |  |
| Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period 3 years. Go to Part 4.   | d is   |
| Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  |  |
| Part 4: Sign Below  | ***************************************  |
| By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.  |  |
| Yolanda ANN Davis   |  |
| Date: 1 / 25/2015   | PARAMETER A BENEVALUE AND A BE |
| If you checked line 17a, do NOT fill out or file Form 122C-2.   |  |
| If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14   | ahove  |

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Form B 201A, Notice to Consumer Debtor(s)

In re Yolanda ANN Davis / Debtor

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 1 / 15 /2015

Yolanda ANN Davis

X Date & Sign

Dated: /\_\_/\_*D*\_/2015

Attorney: Steven Scott Camp

Record # 698385